

2

Ct

ORIGINAL

120
1/22/03
FILED
HARRISBURG, PA

JAN 21 2003

MARY E. D'ANDREA, CLE
Per S/S
Deputy Clerk

IN THE UNITED STATES DISTRICT COURT FOR THE
MIDDLE DISTRICT OF PENNSYLVANIA

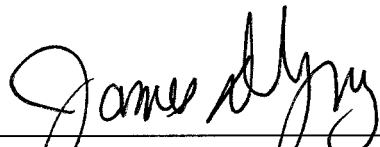
KIM SMITH,	:	NO.: 1:CV01-0817
Plaintiff	:	
	:	(Caldwell, J.)
vs.	:	
	:	(Mannion, M.J.)
WEXFORD HEALTH SOURCES,	:	
INC., et al.,	:	JURY TRIAL DEMANDED
Defendants	:	

**APPENDIX OF EXHIBITS IN SUPPORT OF WEXFORD
DEFENDANTS' MOTION FOR SUMMARY JUDGMENT**

Exhibit "A"	Unsworn Declaration of Ronald Long, M.D.
Exhibit "B"	Unsworn Declaration of Steward Craig Hoffman, P.A.
Exhibit "C"	Unsworn Declaration of Wendy Wright.
Exhibit "D"	Pertinent portions of Plaintiff's prison medical records.

Respectfully submitted,

Lavery, Faherty, Young &
Patterson, P.C.

By: _____

James D. Young, Esquire

Atty No. 53904

225 Market Street, Suite 304

P.O. Box 1245

Harrisburg, PA 17108-1245

Attys for Wexford Defendants

DATE: 1/21/2003

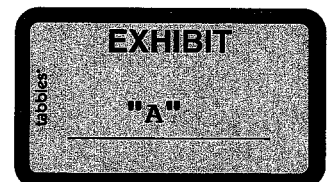
IN THE UNITED STATES DISTRICT COURT FOR THE
MIDDLE DISTRICT OF PENNSYLVANIA

KIM SMITH,	:	NO.: 1:CV01-0817
Plaintiff	:	
	:	(Caldwell, J.)
vs.	:	
	:	(Mannion, M.J.)
WEXFORD HEALTH SOURCES,	:	
INC., et al.,	:	JURY TRIAL DEMANDED
Defendants	:	

UNSWORN DECLARATION OF RONALD LONG, M.D.

I, Ronald Long, M.D., do hereby state under penalty of perjury pursuant to 28 U.S.C. § 1746 that the following is true and correct based upon my own personal knowledge:

1. I am a medical doctor licensed by the Commonwealth of Pennsylvania and have been so licensed continuously since 1986. I am Board certified in the field of Family Practice with added qualifications in geriatric medicine.



2. Since September, 1996, Wexford Health Sources, Inc. has been the contracted medical provider at SCI-Smithfield to provide medical services to inmates at the facility, including utilization review and case management.

3. I have served as the contract Medical Director at SCI-Smithfield since September, 1996 and have provided medical services to inmates at SCI-Smithfield. Those services included the examination, diagnosis and treatment of inmates at the facility, as well as referral of inmates for consultations with outside physicians whenever medically necessary.

4. It is the policy, practice and custom of Wexford Health Sources, Inc. that all inmates are to receive reasonable and medically necessary care in accordance with state and federal laws and the United States Constitution.

5. In the ordinary course of business, SCI-Smithfield maintains prison medical records on each of the inmates incarcerated at the facility, including the Plaintiff, Kim Smith. True and correct copies of the pertinent portions of Plaintiff's prison medical records are attached as an exhibit in the Appendix of Exhibits in support of the Wexford Defendants' Motion for Summary Judgment.

6. I am familiar with the standard practices and procedures utilized in compiling and maintaining medical records at SCI-Smithfield relating to the medical treatment afforded inmate Smith while he was incarcerated at that facility.

7. I am personally familiar with inmate Smith's medical history as reflected in the medical records from SCI-Smithfield, including the treatment provided to him by other treating professionals. Inmate Smith was evaluated and treated by the Medical Department at SCI-Smithfield on nearly a weekly basis for a variety of conditions including diabetes; sleep apnea; Hepatitis "C"; skin rashes of the arms, legs and torso; mild post-traumatic arthritis of the left knee; chronic shoulder and back pain; boils on the buttocks; and other problems. Inmate Smith also received various laboratory tests, diagnostic studies and consultations with specialists outside of SCI-Smithfield. Inmate Smith was also supplied with a knee sleeve and a lumbar support while at SCI-Smithfield.

8. The care provided to inmate Smith at SCI-Smithfield was at all times in accordance with acceptable medical standards and, based upon Smith's prison medical records, no Wexford Health Sources, Inc. personnel

were deliberately indifferent to any serious medical need of inmate Smith while he was incarcerated at SCI-Smithfield.

9. In my professional medical opinion, inmate Smith was provided with reasonable and appropriate medical attention on every occasion that a request was brought to the attention of medical personnel, on every occasion that medical personnel deemed intervention necessary, whether or not initiated by a request from Mr. Smith while he was incarcerated at SCI-Smithfield.

10. At no time during Mr. Smith's incarceration at SCI-Smithfield was I ever deliberately indifferent to any serious medical need of the Plaintiff. To the contrary, throughout his incarceration at SCI-Smithfield, Mr. Smith was evaluated, monitored and treated appropriately by myself and other medical personnel at SCI-Smithfield.

11. As the contract Medical Director at SCI-Smithfield, I am not responsible for nor do I have any personal involvement with the preparation and/or drafting of the protocol for Hepatitis C identification and treatment developed by the Pennsylvania Department of Corrections.

12. In the fall of 1998, the Department of Corrections established a task force to address the issue of Hepatitis C identification and treatment

for the inmate population. The task force was charged with the responsibility of working as a team to identify all the issues involved in the identification, education, treatment and follow-up care of those inmates who tested positive for Hepatitis C. They were also charged with the responsibility to ensure that the care provided in treating Hepatitis C positive inmates was consistent with community standards.

13. In January, 2000, the Bureau of Healthcare Services, Pennsylvania Department of Corrections, implemented a protocol for Hepatitis C identification and treatment. This protocol was provided to all medical vendors to be used as an evaluation and treatment guide for Hepatitis C and all Department of Corrections' institutions, including SCI-Smithfield. Pursuant to that protocol, for those inmates/patients who meet criteria for treatment and are not excluded for medical, psychiatric or other reasons, several medications were available for use and treatment. These medications were Interferon, either monotherapy or dual therapy. However, the medications had limited effectiveness, had significant side effects and could not be used in the instance of ongoing substance abuse. Accordingly, the protocol required that potential recipients of the

medication had to undergo evaluation for treatment candidacy pursuant to the protocol for Hepatitis C identification and treatment.

14. Wexford Health Sources, Inc. then implemented the protocol for Hepatitis C identification and treatment at the facilities where it serves as the contracted medical provider, including SCI-Smithfield.

15. Prior to the implementation of the Hepatitis C protocol, inmate Smith received appropriate treatment for his condition at SCI-Smithfield. He was Hepatitis C positive, but not did have any current symptoms from the disease. Moreover, Interferon had significant side effects such as flu-like symptoms; fatigue; irritability, depression and anxiety; loss of appetite; nausea and diarrhea; and mild hair loss. Moreover, the drug therapy had a limited long-term success rate. There was, therefore, no compelling or immediate need to initiate Interferon drug therapy for inmate Smith's Hepatitis C condition. Inmate Smith was examined by the medical staff and underwent laboratory testing to monitor his liver enzyme levels.

16. In August, 2000, a viral lode-quantitative PCR testing was performed on inmate Smith which showed that his Hepatitis C viral lode was 288,000 international units. At that time, inmate Smith's liver enzymes (ALT) were slightly elevated.

17. On August 30, 2000, I met with inmate Smith to discuss his abnormal lab results and the risks and benefits of the drug therapy for that condition. At that time, inmate Smith indicated that he wanted to receive the drug therapy and thereafter he was evaluated for treatment candidacy in accordance with the Hepatitis C protocol.

18. In late September, 2000, inmate Smith began receiving the dual drug therapy in accordance with the Hepatitis C protocol. He continued to receive that treatment at SCI-Smithfield until January 10, 2001, when he was transferred to SCI-Coal Township.

19. While incarcerated at SCI-Smithfield, inmate Smith also received ongoing evaluation and treatment for sleep apnea, including referrals to pulmonary specialists and outside facilities for sleep apnea studies.

20. Consultation requests were submitted for therapeutic C-PAP study and to put inmate Smith on a C-PAP machine at night. Those consultation requests were denied by Wexford's Utilization Review Department as not medically warranted.

21. Further studies were performed and a consultation request was approved to provide inmate Smith with a C-PAP machine on February 10, 2000.

22. On June 15, 2000, inmate Smith was transferred to the RHU (disciplinary segregation). On June 15, 2000, Nurse Allen noted that inmate Smith was given his C-PAP machine to use in his cell in RHU, but he refused to use the C-PAP device unless he was provided with an extension cord. Inmate Smith was then counseled about his refusal to use the C-PAP machine as a treatment for his diagnosis of sleep apnea by the nursing staff.

23. On October 24, 2000, I spoke with Physician Assistant Baker who indicated that inmate Smith had not used his C-PAP device since June, 2000 without any change in his condition. In my professional judgment, it was no longer medically necessary for inmate Smith to use the C-PAP device.

24. On January 5, 2001, I discontinued the order for the C-PAP device because the patient had been non-compliant for a number of months; there had been no significant change in his condition; and it was

not medically necessary for inmate Smith to use a C-PAP device at that time.

25. On or about January 10, 2001, inmate Smith was transferred from SCI-Smithfield to SCI-Coal Township. I had no further involvement with his medical care after that date.

26. It is my professional opinion, within a reasonable degree of medical certainty, that inmate Kim Smith received reasonable and appropriate medical treatment for his various medical conditions while incarcerated at SCI-Smithfield.

01/21/2003 11:34 8146437165 → 17172337003

NO. 044

001


Jan 21 03 12:20p

LAWY, FAHERTY

717-203-7003

p.11

Date: 1/21/03


DONALD M. LODGE, M.D.
Medical Director, SCI-Smithfield

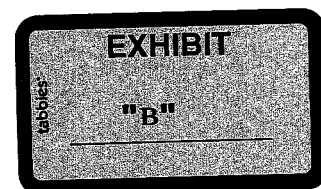
IN THE UNITED STATES DISTRICT COURT FOR THE
MIDDLE DISTRICT OF PENNSYLVANIA

KIM SMITH,	:	NO.: 1:CV01-0817
Plaintiff	:	
	:	(Caldwell, J.)
vs.	:	
	:	(Mannion, M.J.)
WEXFORD HEALTH SOURCES,	:	
INC., et al.,	:	JURY TRIAL DEMANDED
Defendants	:	

UNSWORN DECLARATION OF STEWARD CRAIG HOFFMAN, P.A.

I, Steward Craig Hoffman, P.A., do hereby state under penalty of perjury pursuant to 28 U.S.C. § 1746, that the following is true and correct based upon my own personal knowledge:

1. I am a physician's assistant licensed by the Commonwealth of Pennsylvania and have been so licensed continuously for the past six years.



2. For the past four and a half years, I have been employed by Wexford Health Sources, Inc. as a physician's assistant at SCI-Smithfield to provide medical services to inmates at SCI-Smithfield.

3. It is the policy, practice and custom of Wexford Health Sources, Inc. that all inmates are to receive reasonable and medically necessary care in accordance with state and federal laws and the United States Constitution.

4. On numerous occasions, I evaluated and/or treated inmate Smith for a variety of medical conditions while he was incarcerated at SCI-Smithfield.

5. At no time during Mr. Smith's incarceration at SCI-Smithfield, was I ever deliberately indifferent to any serious medical need of the Plaintiff. To the contrary, I always exercised sound professional judgment when evaluating, treating and/or monitoring inmate Smith's various medical conditions.

6. On January 24, 2000, I evaluated inmate Smith at sick call. At that time, he was complaining of right shoulder pain with movement and

occasional swelling. He denied any history of trauma and any loss of function. He was also complaining of left wrist pain and occasional numbness however denied any recent trauma. He was status post-surgery, open reduction internal fixation of the left wrist approximately 17 years ago and indicated that repetitive motions in his kitchen job worsened his symptoms. Inmate Smith also complained of left knee pain x 6 days; denied any recent history of injury; and indicated that he had a history of degenerative joint disease in his left knee.

7. I evaluated inmate Smith on January 24, 2000 and my assessment was right shoulder pain with questionable AC joint degenerative joint disease; left knee instability - degenerative joint disease; and left wrist tendonitis. Based upon my professional judgment, I believed it was appropriate to prescribe non-steroidal anti-inflammatories or Tylenol for inmate Smith's complaints of knee, shoulder and wrist pain. Inmate Smith, however, refused to take anti-inflammatories or Tylenol for the pain.

8. It is entirely within the bounds of appropriate medical care to treat chronic joint pain and/or inflammation with non-steroidal anti-inflammatories and/or Tylenol.

9. There are a number of non-steroidal anti-inflammatories available in the formulary at SCI-Smithfield. Moreover, an inmate's known drug allergies are listed on the inmate's prison medical chart and I take that information into account when prescribing medications.

01/21/2003 13:33 B146437165 → 17172337003

NO. 004 001

Jan 21 03 01:21p

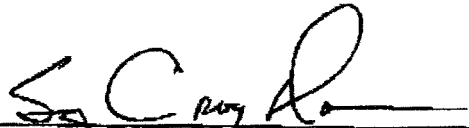
LAWRY, FAHERTY

717-711-7003

P. 6

Date:

1-21-03


Steward Craig Hoffman, P.A.

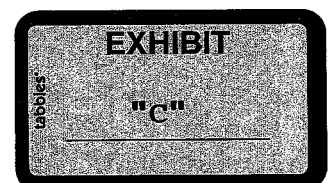
IN THE UNITED STATES DISTRICT COURT FOR THE
MIDDLE DISTRICT OF PENNSYLVANIA

KIM SMITH,	:	NO.: 1:CV01-0817
Plaintiff	:	
	:	(Caldwell, J.)
vs.	:	
	:	(Mannion, M.J.)
WEXFORD HEALTH SOURCES,	:	
INC., et al.,	:	JURY TRIAL DEMANDED
Defendants	:	

UNSWORN DECLARATION OF WENDY WRIGHT

I, Wendy Wright, do hereby state under penalty of perjury pursuant to 28 U.S.C. § 1746, that the following is true and correct based upon my own personal knowledge:

1. I have been employed by Wexford Health Sources, Inc. as the Healthcare Unit Administrator at the State Correctional Institution-Smithfield since June, 1999.



2. Since September, 1996, Wexford Health Sources, Inc. has been the contracted medical provider at SCI-Smithfield to provide medical services to inmates at the facility, including utilization review and case management.

3. I am trained and certified as a paralegal and I serve as the liaison between the medical department and the staff at SCI-Smithfield. I am responsible for the administrative oversight and implementation of Wexford's contractual agreements with the Pennsylvania Department of Corrections to provide healthcare services at SCI-Smithfield.

4. I am not a healthcare professional and I am not involved in providing evaluation and/or treatment for inmates at SCI-Smithfield, including the Plaintiff, Kim Smith.

01/21/2003 10:00 8146437165 → 17172337003

NO.037

001

Jan 21 03 19:56a

LAVRY, FHERTY

717-233-7992

819

DATE: January 21, 2003

Wendy Wright
Wendy Wright
Healthcare Unit Administrator

PROBLEM LIST

Prob. Letter	Date	Chronic Problems	ICD
A		[REDACTED]	[REDACTED]
B		Mild past traumatic arthritis - (L) knee	716
C			
D			
E			
F			
G			
H			

Prob #	Date	Temporary Problems	Recurrence Date					ICD
			1	2	3	4	5	
1		Quest: enable. sleep apnea						780
2	3-01	Headaches						784
3	4-10-98	Tinea Pedis	11/27/98					110.4
4	"	Lichen Simplex chronicus						698
5	4-15-98	Cold						416
6	4-29-98	Upper leg PAIN						720
7	6-1-98	Shoulder Discomfort						719
8	"	Urine Rx						
9	"	Back PAIN	11/5/98					724
10	"	Productive Cough						786
11	7-22-98	Hemorrhoids						787
12	7-28-98	Oral ASCESS						561
13	9-10-98	Folliculitis						704
14	9-19-98	Arthritis						036

Problem List
Commonwealth of Pennsylvania
Department of Corrections
DC - 467

Inmate Name: Smith, Kim

Inmate Number: CT2162

DOB: 10-18-56

EXHIBIT

"D"

Prob. Letter	Date	Chronic Problems	ICD-
A	7/14/99	Sleep apnea	280.5
B	2-5-99	Chronic Pharyngitis	472.0
C	9/27/99	Diabetes	250.0
D		DJS	710.
E		Lichen simplex chronicus	698.
F	12-2-99	Generalized Anxiety Disorder	300.0
G	8-14-00	HCV HCV	070.
H			

Prob #	Date	Temporary Problems	Recurrence Date					ICD-
			1	2	3	4	5	
15	11/19/98	Pilonidal cyst						685.
216	7/98	risky behavior						
317	1-5-99	histulotomy surg.						49.1
418	1-99	UAE Bicuspid Aortic Regurgitation						469.5
519	3-11-99	Trauma (hand)						914
520	3-16-99	Chronic knee pain						719.
721	4-12-99	Folliculitis						704.
822	"	Tinea Pedis	4/24/01	4/11/01				110.
823	1-24-00	(L) wrist tendonitis						726
1021	1-24-00	(R) AC joint - pain (shoulder)						719.
1025	3-2-00	Non-compliant therapeutic diet						445.
1026	3-21-00	(L) forearm blister						913
1027	4/21/00	Mental (wheeled)	8/4/00					522
1028	5-16-00	GGT Gamma Glutamyl transferase						794.

Problem List
Commonwealth of Pennsylvania
Department of Corrections
DC - 467

Inmate Name: Smith, Kim
Inmate Number: CT 2162
DOB: 10-18-56

(page 20)

PROBLEM LIST

Prob. Letter	Date	Chronic Problems	ICD-9-CM
I		MDDY7	250.00
J			
K			
L			
M			
N			
O			
P			

Prob #	Date	Temporary Problems	Recurrence Date					ICD-9-CM
			1	2	3	4	5	
21	15	6/26/00 Dental: referred to Otolaryngology						
20	16	8/4/00 Dental: post-operative infection						
21	17	8/8/00 elevated LFTS						794.8
32	18	9-5-00 Eustachian tube dysfunction [R]						381.81
33	19	9-27-00 otitis media O/E	11-27-00	11-27-01				382.9
34	20	11/21/00 CP						741.50
35	21	8/7/01 decreased visual acuity						369.9
36	22	5/14/01 c/o DIZZINESS & NAUSEA						780.41 87.02
37	23	5-16-01 itchy ft between toes						698.9
38	24	5/27 c/o H.A. & BLOOD SUGAR						784.0
39	25	7/21/01 Mx3 @ Mallin						714.69 782.2
40	26	8/29/01 Dermatitis.						692.9
41	27							
42	28							

Problem List
Commonwealth of Pennsylvania
Department of Corrections
DC - 467

Inmate Name:

Smith, Kim

Inmate Number:

CT 2162

DOB:

10-18-56

Institution:

Sci-Sm 11/16/01

page 2 of 2

Name of Patient Steroid injection (R) shoulder

Name or description of operation or other procedure to be performed

To be performed under the direction of Dr. Long

Physician, Physician Assistant or Dentist

I understand the most common risks of the procedure(s) include: Bleeding, infection, pain

By signing this document, I certify that I have read, or have had read to me, and fully understand the above consent to treatment and/or operations and that I fully understand this consent. Finally, I have had the opportunity to ask questions of the doctor and all such questions have been answered.

x - [Signature]
Inmate Signature

Inmate Signature _____

Ronald Long, M.D.

4-10-00

Date _____

Time

Physician, P.A., Dentist

~~Physician, P.A., Dentist~~

4/11/02
Date

Date _____

Time

Witness

Witness

Date _____ Time _____

Date _____

Time

Commonwealth of Pennsylvania
Department of Corrections
DC-452

Inmate Name: Smith, Kim

Inmate Number: CT 2162

DOB: 10-16-56

Institution: SCI - Smith Field

Filed
APR 12 2000
SCI-SMITHFIELD
Medical Records Dept.

RELEASE FROM RESPONSIBILITY FOR MEDICAL TREATMENT

I, Kim Smith, an inmate at S.C.I. Smithfield,
(Inmate's name) (Institution)

have been advised by the physician named below that I am in need of medical treatment for:
Fissure

I understand the nature of the treatment is: (Attending physician: Give brief description of the medical treatment required, and the possible consequences of this inmate not receiving it.)

By refusing rx, MD unable to determine
if further tx needed. This could possibly
be detrimental to your health.

I hereby refuse this treatment. I have been fully advised of the nature of my ailment or injury and fully realize the effects that may result from my refusal to accept the prescribed treatment. I hereby release the attending physician, and the institution from all legal responsibility for any ill effects which may result from my refusal to accept medical treatment.

RONALD A LONG, M.D.

In signing this I certify that the above has been read and fully explained to me.

my to sign

D Myers RN
Inmate Signature

10-13-98
Date

D Myers RN
Witness Signature

10-13-98
Date

Ronald A Long
Physician Signature

10/13/98
Date

Mary Ann Roth
Witness Signature

10-13-98
Date

Release from Responsibility for
 Medical Treatment
 Commonwealth of Pennsylvania
 Department of Corrections
 DC-462

Inmate Name

Smith Kim

Inmate Number

CT 2162

DOB:

10-18-56

Institution:

SC/Sm.

RELEASE FROM RESPONSIBILITY FOR MEDICAL TREATMENT

I, Kim Smith, an inmate at S.C.I. Smithfield,
(Inmate's name) (Institution)

have been advised by the physician named below that I am in need of medical treatment for:
glycohemoglobin, urine for microalbumin

I understand the nature of the treatment is: (Attending physician: Give brief description of the medical treatment required, and the possible consequences of this inmate not receiving it.)

by refusing labwork I may not know
if I have any disease process that could
lead to further complications at a later date

I hereby refuse this treatment. I have been fully advised of the nature of my ailment or injury and fully realize the effects that may result from my refusal to accept the prescribed treatment. I hereby release the attending physician, and the institution from all legal responsibility for any ill effects which may result from my refusal to accept medical treatment.

In signing this I certify that the above has been read and fully explained to me. **DR. MIGUEL SALOMON M.D.**

up to sign
 Inmate Signature Date

Miguel Salomon 12-01-99
 Physician Signature Date

Joe J. Rabin 11-30-99
 Witness Signature Date

[Signature] 11/30/99
 Witness Signature Date

Release from Responsibility for
 Medical Treatment
 Commonwealth of Pennsylvania
 Department of Corrections
 DC-462

Inmate Name

Smith Kim

Inmate Number

CT 2162

DOB:

Institution:

SCI-Smithfield

Filed
 DEC 02 1999
 SCI-SMITHFIELD
 Medical Records

RELEASE FROM RESPONSIBILITY FOR MEDICAL TREATMENT

I, Ken Smith, an inmate at S.C.I. Smithfield,
(Inmate's name) (Institution)

have been advised by the physician named below that I am in need of medical treatment for:

Sleep Apnea

I understand the nature of the treatment is: (Attending physician: Give brief description of the medical treatment required, and the possible consequences of this inmate not receiving it.)

CPAP Machine to be issued, for use in block. By refusing to come to medical when called, I cannot afford the machine that could prevent my death.

I hereby refuse this treatment. I have been fully advised of the nature of my ailment or injury and fully realize the effects that may result from my refusal to accept the prescribed treatment. I hereby release the attending physician, and the institution from all legal responsibility for any ill effects which may result from my refusal to accept medical treatment.

Ronald Long, M.D.

In signing this I certify that the above has been read and fully explained to me.

Refused to sign
 Inmate Signature Date

Ronald Long 2/4/00
 Physician Signature Date

Shelley 2-3-00
 Witness Signature Date

James R. B. 2-3-00
 Witness Signature Date

Release from Responsibility for
 Medical Treatment
 Commonwealth of Pennsylvania
 Department of Corrections
 DC-462

Inmate Name Smith, Ken

Inmate Number CT 2162

DOB: 10-16-56

Institution: SCC Smi

Filed
 FEB 04 2000
 SCL-SMITHFIELD
 Medical Records Dept.

RELEASE FROM RESPONSIBILITY FOR MEDICAL TREATMENT

I, Smith, Kim Ct 1262, an inmate at S.C.I. Smithfield,
(Inmate's name) (Institution)

have been advised by the physician named below that I am in need of medical treatment for:

Sleep apnea

I understand the nature of the treatment is: (Attending physician: Give brief description of the medical treatment required, and the possible consequences of this inmate not receiving it.)

Inmate has order for C-PAP machine to assist with breathing. Inmate refused to take machine with him because he received a misdiagnosis yesterday on the block. He states the misdiagnosis was due to a misunderstanding due to the machine and he doesn't want it until he finds out the results of the misdiagnosis.

I hereby refuse this treatment. I have been fully advised of the nature of my ailment or injury and fully realize the effects that may result from my refusal to accept the prescribed treatment. I hereby release the attending physician, and the institution from all legal responsibility for any ill effects which may result from my refusal to accept medical treatment.

Ronald Long, M.D.

In signing this I certify that the above has been read and fully explained to me.

Refused to sign 2/4/00
 Inmate Signature Date

Ronald Long 2/4/00
 Physician Signature Date

Himmerman, RN 2/4/00
 Witness Signature Date

H. Newton 2-4-00
 Witness Signature Date

Release from Responsibility for
 Medical Treatment
 Commonwealth of Pennsylvania
 Department of Corrections
 DC-462

Inmate Name Smith, Kim

Inmate Number Ct 1262

DOB: 2/6/2

Institution: Smithfield

Filed
 FEB 04 2000
 SCI-SMITHFIELD
 Medical Records Dept.

RELEASE FROM RESPONSIBILITY FOR MEDICAL TREATMENT

I, SMITH, Kim, an inmate at S.C.I. Smithfield,
(Inmate's name) (Institution)

have been advised by the physician named below that I am in need of medical treatment for:

Sleep apnea.

I understand the nature of the treatment is: (Attending physician: Give brief description of the medical treatment required, and the possible consequences of this inmate not receiving it.)

Inmate is choosing not to use C-PAP device in Hb. There are limits with a electrical power and cannot demand on a extension cord for the C-PAP device. Inmate is choosing not to use the device, even though he can use it with no extension cord. Counselled inmate regarding his for choice regarding this matter and he refuses to sign the release.

I hereby refuse this treatment. I have been fully advised of the nature of my ailment or injury and fully realize the effects that may result from my refusal to accept the prescribed treatment. I hereby release the attending physician, and the institution from all legal responsibility for any ill effects which may result from my refusal to accept medical treatment.

Ronald Long, M.D.

In signing this I certify that the above has been read and fully explained to me.

<u>Refused to sign release</u>	<u>6-15-00</u>	<u>Ronald Long</u>	<u>6/16/00</u>
Inmate Signature	Date	Physician Signature	Date
<u>Ronald Long</u>	<u>6-15-00</u>	<u>Chad [Signature]</u>	<u>6/16</u>
Witness Signature	Date	Witness Signature	Date
	<u>1825</u>		

Release from Responsibility for
 Medical Treatment
 Commonwealth of Pennsylvania
 Department of Corrections
 DC-462

Inmate Name SMITH, Kim
 Inmate Number CT 2162
 DOB: 10-18-56
 Institution: Smithfield

File
 JUN 16 2000
 SCI-SMITH
 Medical Records

PROGRESS NOTES

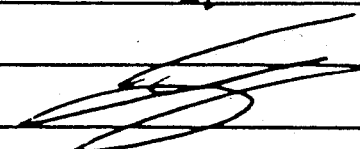
☐ Outpatient

☐ Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
3-16-99 1045	6	med	L: P there for knee surgery renewal - P: See orders
3-16-99	A	NSg. 1745	To Altoona Hosp. for CPAP study re a security - W. H. Hight
3-17-99 0900		NSg	Returned from Altoona Hospital for sleep study - L. Horton Linda L. Horton RN-BSN
3-22-99 1130		NOg	Relace wrap in appropriate condition Kristen Grove, RNH
4-4-99 1400		NSg	Mouth guard returned to Dr. Kullar to be given to Dr. Kullar for disposal - L. Horton
4-12-99 1445		med	2yr Phys completed this day - Papules on ARMS & legs - e post healing keloids - Derm web areas too @ A. Folliculitis Tinea Pedis - Pi See orders RAY McMILLAN, PA-C WHS
4-15-99		Pre	P- for removal of back hair, 52mm 52mm USG - good results - 12mm 12mm See on line

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name: Smith, Kim
Inmate Number: CT2162
DOB: 10-18-56
Institution: Smithfield

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
4-16-99 0905	7	med	Recent Labs - SGOT 71 SGPT 61 GGT 139 See orders REM. MULLY, M.D. med
5-7-99 0820	8	med	Recent Labs SGOT 74 SGPT 60 GGT 199 5-6-99 See orders REM. MULLY, M.D.
5-10-99 1155 F	7	med	Is Pt here because of red of folliculitis - No change in rx - O. Dark papules @ ARMS - A1? Derm Pl See orders REM. MULLY, M.D.
5-24-99 0910	21	med	3/ Here to review Maryland VR denial for dermatologist states he had rx in 1996 - told it was a "mimic." P/ review 1996 record 
1500 06-21-99		noq	DC-487 completed + faxed for 06-18-99 ATA - 2 letters La Westwood rd. changed at 11:00 AM DC-487 needed - 2 letters La

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
1420 8-2-99		RN	Inmate scheduled for follow-up to renew lumbar support w/ Reschedule for 8-9-99 (Inmate ATA) at. chdr R
1345 8-9-99		Ry	see pt re: us eqip - ATA re cur.
1245 8-13-99		NSG	ATA return from West Maryland CO. ATA lacks past hx arthritis @ knee. Chronic urinitis, past psych hx ^{ad} sleep apnea pt currently c/o slight stomach virus. "loose stools on occasions". Denies night sweats, wt loss abd pain and HIV. Currently no med orders. leaving ATA pt had medication and ATI dent orders. advise re pat for renewal of meds. pt is scheduled 8-16-99 for equip of lumbar support. supervisor aware of return to arrange for CPAP set-up, TST and x-ray consent
1140 8-16-99	9	PAC	Revisit re Back Support & lya, w/ w/ long sleep to relearn

S. CRAIG HOFFMAN PA - C

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name: Smith, Kim
Inmate Number: CT 2162
DOB: 10-18-56
Institution: SCI-SMI

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
0845 9-19-99		Nsg.	<p>S) "My @arm is tingly, esp. these 3 fingers."</p> <p>O) Received a phone call from officer on "F" block stating inmate is C @arm numbness since 05:30 AM. Inmate ambulated to medical 5 difficulty. No SOB or resp distress noted. AFOX3. Skin warm & dry. C @arm numbness & intermittent chest pain VSS-BP 136/78 Pulse 96, regular, resp. 18 even & unlabored. States "pain in chest goes up towards neck, then goes away." C no nausea, dries emesis.</p> <p>Hand grasps ^{even} equal & strong bilaterally. State he "has been under alot of stress lately." He also states, "The other guys are making fun of my appearance. The officers on my block hate me, that's why they planted betting tickets in my Domino's. I wish I could have stayed on "I" block." O) Alets in Comfort. P) Instructed to put sick call slip in if any further complications, voiced understanding. Sent back to F block. — M Emedyga</p>
0925 9-23-99		Nsg.	<p>Referred J/C — j (N/A)</p>

PROGRESS NOTES

☐ Outpatient

☐ Inpatient

Date/Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
1025 4-24-99		PAC	③ Pt % (earr) on ④ delirious on ⑤ K 5 yr
F			<p> The break out was given soon about 10:00 every morning days, also for 5-8 hrs on face and + legs. Also % dry early morning x 1 yr to morning. Also % OA approximately x 2-3 hrs to usual space was given for occasional nausea and, rebound to sleep. No perspiration, mild phosphenes. Also % back pain on bones, 16 yr old, and ④ there was no green color to phlegm and dry. Also % in clothing in chest to pain the go on chest up now with x 3 hrs also, usually in the not rebound in morning. The phlegm in the the same time. Also % early morning off 400 at noon. I appeared and weight loss x 3 months. Also % trouble wearing, states that at end of phase stops wearing and has associated pain. No pain discharge ① RENT - unavailable Neck - no tenderness, no bones legs - CTA Heart - RRR ② ASD - NES x 4, sort to mild green blood ① 5-6 </p>

Progress Notes
 Commonwealth of Pennsylvania
 Department of Corrections
 DC-472

Inmate Name: Shark Kim

Inmate Number: CT 2162

DOB: 10-18-56

Institution: See

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
		CONT	TTP, no masses or HSM Granular - non calc mls, some H, no HSM Recont - normal epithelium none, no HSM RST Reserve has not really healed as yet epithelium, previous biopsy was found to TTP Frost: very dry, patchy skin barrier as look over Bel + Kase - immunologic ① Merganser Gophers Number Eczema Dry skin - over Procedures Pub Anesth PG Cardiac Resection, or other poss Chronic Bel + Kase Pain Anesth ? why to lose ② Sam Oads Sal
			S. CRAIG HOFFMAN PA - C
9/6/99 1830		NSG	EBG completed (#1808) <i>Hessinger</i>
9/27/99 2030		NSG	O- Received call from Jersey Shore Lab - critical value - Glucose 317. Phoned Dr. Mehedy - ordered accur now + call him. Results of accur 485 - orders received. Inmate states he's been having blurred vision + feeling hyper + does have hx of DM w/ family. Placed on MD line for am. <i>Hessinger</i>

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
9-27-99		RN	O: P.L. ingested 2 units (D) insulin & (D) dextroid per MD's orders. Wh
2120			
4/24/99		My	re - wt 187 1/2 (5.22) FBS - 218 → MD line to ease "FBS" - Urinary freq. & thirst
9/28/99	c	md	Please refer to admission note in infirmary chart
1030			
			Ronald Long, M.D.
9-28-99	c	ng	Adm to Inf. for control of Diabetes
10-4-99	c	ng	Dic from infirmary to blood. Inst to Regu any changes or problems. Verbalize understanding of types hypoglycemia.
1205			
10-4-99		ng	Post H.I.D. test counseling done. Discuss test result meaning & reviewed mode of transmission? mode of protection. Verbalize understanding. Dee
0645			
10-5-99	c	ng	FBS via glucometer 190 - p complains - 2 units Darn given Chyden
1100			
10-5-99	c	ng	Glucometer ✓ 262 - 6 units given as ordered. wt. 190# Chyden

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name: Smith, Kim

Inmate Number: CT 2162

DOB: 10-18-56

Institution: Smithfield

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
10/12/99 0810	C	MD	<p>s/ Has noticed a decrease in polyuria + polydipsia. Less fatigue. Has noted some constipation. Microscopic exam of VSS.</p> <p>General - awake, alert, and active.</p> <p>#1 Diabetic - much better control</p> <p>P/ See order</p>
10/25/99 1000	C	MD	<p>s/ c/o athlete's foot and chronic Shi constipation.</p> <p>No hypoglycemic symptoms of VSS + glucose.</p> <p>Shi - taken simple chronic chronic constipation Tinea pedis x callus.</p> <p>#1 DM - good control</p> <p>#2 Tinea pedis</p> <p>#3 Lichen simplex chron</p> <p>P/ See order</p>
			Ronald Long, M.D.

PROGRESS NOTES

☐ Outpatient

☐ Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
0725 10-27-99	8	NSG	nk for foot soak x 15 min c. pumice stone
102899 1940	8	NSG	S - I got shaky & was sweating a lot O - Call from F block after stating above. Went to F block & upon arrival he was in the shower. Examined him with in his cell He was A+D x 3 in no distress. A scan done at this time = (54). 1 tube instagluose given & repeat accu (71). he stated he had a lot to eat today & that this was his first time he had such symptoms. He had no other A - alt in mt P - Explain S+D hypo/hyperglycemia & to Well place in CR for am Ronald Long, M.D. <i>[Signature]</i> 10/29/99 E 1030
05740 11-1-99	8	NSG	nk for foot soak x 15 min c. pumice stone
1630 11-1-99	8	NSG	nk for BS ✓ 91 no coverage
1100 11-3-99	8	NSG	foot soak x 15 min c. pumice stone
11-8-99	8	NSG	nk for foot soak & use of pumice stone
11-10-99	8	NSG	nk for foot soak c. pumice stone
0710 11-12-99	8	NSG	foot soak c. pumice stone

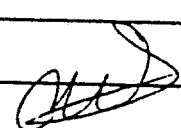
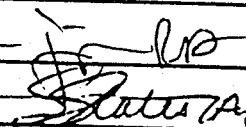


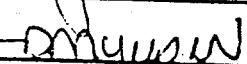


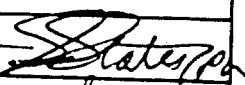
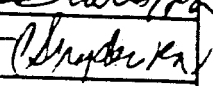
Progress Notes
 Commonwealth of Pennsylvania
 Department of Corrections
 DC-472

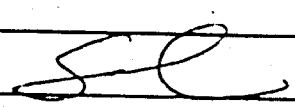
Inmate Name: Smith, Kim

Inmate Number: CT 2162

DOB: 10-16-56

Institution: SCI-Sm. L. H. 11/11

Time	#	Abbreviation	Subjective, Objective, Assessment, Plan
11/13/99	C	111	S: - 43 y.o. who has been hungry as well as
11/13/99		1100	No fever + chills for 3 days & pain in both
			CVA are and Sunburn
			O: Comm & alert
			BP = 130/80
			Lungs: equal expansion clear bilaterally
			Q: Report Nausea & N/V No jaundice
			Abdominal tenderness & positive aorta
			CVA -
			A: Throat pain & DTI
			P: see orders.
			
0735	8	NS	foot soak X 15 min & pumice stone - 
11-15-99	8	NS	BS ✓ 89
11-15-99	8	NS	foot soak & pumice stone on RL - 
0705	8	NS	foot soak & pumice stone on RL - 
11-14-99	8	NS	foot soak & pumice stone - 
0730	8	NS	foot soak & pumice stone - 
11-22-99	8	MD	3/ Day well.
0755			of wt 197
			Heart - normal
			Lungs - clear
			Abdom - benign
			H1" / Diabetes - good control
			cl no chg
			
1630	8	NS	RL BS ✓ 100 - 
11-24-99	8	NS	RL for foot soak & pumice stone - 

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
0725 12-27-99	F	NSG	NL for foot soak & pumice stone — M. Emedy RN
0725 12-27-99	F	NSG	NL for foot soak & pumice stone — M. Emedy RN
0710 12-31-99	F	RN	NL for foot soak & pumice stone — M. Emedy RN
0730 1-3-00	F	RN	NL for foot soak & pumice stone and M. Emedy RN
0720 1-5-00	F	NSG	foot soak & pumice stone — DM. Myers RN
0725 1-10-00	F	NSG	NL for foot soak & pumice stone — M. Emedy RN
1-12-00	F	NSG	NL for foot soak & pumice stone — S. Hoffman
0725 1-14-00	F	NSG	NL for foot soak & pumice stone — S. Hoffman
0905 1-20-00	F	PAE	<p>⑤ Pt for machine on rear, has been doing foot soaks 3x wk for 90 days. Says so "has cracking perily skin."</p> <p>⑥ Pt does have "cracking perily skin" & only old callousing to bottom of heel R & L. Probably 2" or much soaly.</p> <p>⑦ Dry Cracking Skin to rear.</p> <p>⑧ Sun Ointment</p>
 S. CRAIG HOFFMAN PA-C			
1-24-00	3/23/24	PA-C	<p>S) Pt on SC c/o "R" shoulder pain "4 months. Pt c/o "pain & movement, cracks & creaks." Pt states occasional swelling. Pt denies any history of trauma. Pt denies any loss of function. Pt also c/o "D wrist" pain x 3 weeks. Pt c/o pain and occas. numbness. Pt states FV D wrist S/P surg. & ORIF 17 years ago. Pt states no ORIF now. Pt denies any recent trauma. Pt works in kitchen and notices worsening of</p> <p>(Cont'd) symptoms & repetitive motions.</p>

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
1-24-00 1005 F	6/23 21 (Cont'd)	PA-C	<p>"(L) Knee pain" x 6 days. Pt c/o "sharp pains to hamstring" & painful ambulation. Pt has hx DTD (L) knee. Pt denies any recent history of injury.</p> <p>o/m/s - (R) shoulder - erythema; edema; bony deformity; (+) AC joint crepitus; (+) AC joint mild TTP; FROM; strength +5/5; (L) knee - (+) patellofemoral grind test; erythema, edema; bony deformity; (+) medial laxity & valgus/varus stress testing; mildly (+) ant. / post. drawer test; (-) McMurray's; strength +5/5 (L) knee; (L) wrist - erythema, edema, bony deformity; (+) pain & flexion, FROM</p> <p>A) (R) shoulder pain - ? AC joint DTD (L) knee instability - DTD (L) wrist extensor ^{flexor} tendinitis</p> <p>P) See Orders. Pt refuses to take anti-inflam. or Tylenol for pain.</p>
			S. CRAIG HOFFMAN PA - C
1-25-00 1-28-00	F	Nsg.	Seen by Dr. Ellen on telepsych - McEnelly, A-

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name: Smith, Kim

Inmate Number: C 2162

DOB: 10-16-56

Institution: SCI-Smithfield

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective Assessment, Plan
2/2/00 1130	A	neg	Per CHCA's request this note is written. Mr. Heaver CHA interviewed Mr. Smith at 1400 on 2/1/00 for the purpose of explaining the special instructions related to issuing the C-PAP machine. Mr. Heaver stated that Mr. Smith did not have any questions and indicated he would comply with the instructions. <i>Heaver</i>
2/2/00 0710	A	neg	T.C. to block officer & informed him when Mr. Smith called to medical for nurse line to send block boy with him. @ 0715 the Smith showed up for nurse line without block boy. T.C. to officer on block. The Smith not sent to D.H. but to early chow & he came to medical. Checked & officer informed when inmate back from early chow to send to medical. He refused to give direct order. The Smith became very angry in medical when informed he was not called for N.E. D Seelan
2/2/00 0830	AF	neg.	Checked & block officer & inmate refused to come to medical - refused to come down & sign refusal. <i>D Seelan</i>

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
1130 2-16-00 F	C	PAC	<p>⑤ Pt has no DM change, seems he has been really well, no dizziness, usual problems, SOB, chest pain, usual problems or perturbations.</p> <p>⑥ Eyes - pupils, PERRLA, Fovae, Fund - healthy Nuch - no bruits Wt - 219 BP 120/62 Cgs - Cx A Heart - RRR 50 Feet - normal sensation, pulses, cap refill</p> <p>⑦ DM ⑧ Svc O2 Sat</p> <p style="text-align: right;">Sol</p>
2-18-00 0800	C	NS7	C-PAP machine inspected & filter checked. All parts intact & cleaned. — R. Hottel
2-24-00 0900	C	NS7	Inspection of C-PAP machine. Filter, all parts & tubing intact. — R. Hottel

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
0750 2-10-00	A	Nsg.	NL for issue of C-PAP machine & accessories. Inmate given copy of equipment sheet & instructions, voiced understanding. Unit officer notified that inmate received the above equipment. Inmate instructed specifically that he is not to take apart the machine in his cell, that he is to report to medical if the C-PAP machine, accessories & block bag so the nurses can inspect it for proper working condition, voiced understanding. Inmate had no further questions @ this time. ————— M. Evedey RN —
2-11-00 0750	A	Nsg	Inmate counselled re: (MURKIN) noncompliance ————— R. Horton —
0755 2-13-00	A	Nsg.	TC from black officer questioning when Smith to return machine. Inmate told officer that he didn't give it up until 1100 because he sleeps from 0700 to 1100. Re-informed that Smith needs to return machine in AM 'Upon waking' & going to breakfast. — D. Bee
0800 2-16			

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name:

Smith, Kim

Inmate Number:

CT 2162

DOB:

10-18-56

Institution:

Smithfield

PROGRESS NOTES

☐ Outpatient

☐ Inpatient

Date/Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
0848 2-28-00	3 24.21	PAE	<p>③ Pt. % sore's between toes, off + on X</p> <p>Syns, he is per as TENS, currently in</p> <p>beds and lounge. Also % still long</p> <p>pin in ② shoulder the redness and</p> <p>elbow X last 24h Also % ④ still long</p> <p>pin also 3 change. No power lines</p> <p>④ Pt stills seems to take into machine</p> <p>to include Tylenol and when trying to</p> <p>discontinue has he gets headache.</p> <p>⑤ Feet - pt has mild dry crackly skin</p> <p>between toes, no pressure</p> <p>⑥ Shoulder - no redness, no pain, no pressure</p> <p>on cable. Repins pin on cable</p> <p>on abduction > 90° and in</p> <p>adduction. ⑦ TTP to AC joint</p> <p>No other TTP but pt seems</p> <p>he has pain in ② lateral deltoid</p> <p>also. NJ joint directly</p> <p>⑧ Wrist - no redness, no pain, no pressure on</p> <p>cable. Pain is hyperextension</p> <p>No TTP, NJ joint directly</p> <p>⑨ SJD TENS</p> <p>⑩ Non Contact Patient</p> <p>⑪ Care current Lacer, Laceration</p>

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name:

Smith, Ken

Inmate Number:

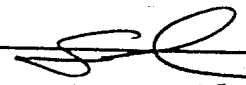
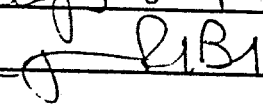
C- 2162

DOB:

10-18-56

Institution:

SCPS

Time	#	Abbreviation	Remarks
			Subjective, Objective, Assessment, Plan
			CONT PT REWINDS TO TRY ANTE INFLAMMATION TO INCLUDE Tylenol, Explained that until he is willing to try recommended Tx I can't progress in Tx options Pt said "you don't know what the fuck your doing" and got up + left
			 S. CRAIG HOFFMAN PA - C
0115 3-2-02	A	May	hl p/w imp. of machine. all pgs in workj order 
3-6-02	24	PAC	① PT STAYS small bump @ shoulder joint Says "I don't believe this is Arthritis it doesn't feel like the arthritis in my knee, I have so much pain on the muscles of my arm, I need an xray to find out what is going on." The pain is in the triceps, deltoid and upper humeral latissimus. Also 1/2 shaking Sensation in triceps, ? fasciculations has been sleeping on back for last week. Still refuses to take any Tylenol as well as other and all ANTI INFLAMMATION ② ② shoulders - no redness, swelling, redness or color. From the pain in shoulder ↑ pain in assessment and pain in IN CONT

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
			<p>① AC Joints. ② TTP to ③ AC Joints</p> <p>④ Heart NV Joints.</p> <p>⑤ AC Joints from Anub 20 to DJD</p> <p>⑥ Pt agrees to try Tylenol P</p> <p>long discussion</p> <p>S. CRAIG HOFFMAN PA-C</p>
3/16/00 830	10	PA-C	<p>5) Pt A 43y.o. Blk ♂ on S.C. c/o "head cold" x 2 days. Pt states cough is worse and has produced small amount of yellow phlegm. Pt denies fever, N/V, or diarrhea.</p> <p>⑥ Smoker 10cigs/day. Pt has hx of sleep apnea.</p> <p>⑦ NAD; T98.4 °F; HEENT - NCJAT; PERRLA; eyes watery; TMS @ fluid c retraction and ↓ light reflex Bilat; nasal turbinates boggy & erythematous c thick congestion [R] & [L]; pharynx - mildly injected c thick PND</p> <p>Neck - Wadenopathy</p> <p>Heart - RRR (SM)</p> <p>Lungs - CTA</p> <p>(Cont'd) A) LRTI</p>

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name:

Smith, Kim

Inmate Number:

CT 2105

DOB:

10-18-56

Institution:

SCI-Smithfield

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
3/16/02 830 P	18	PAR (cont'd)	P) See Orders. Pt to 1 fluid & stop smoking. the pm. M. Baker MELINDA C. BAKER, PA-C
1725 3-21-02	26	NS	S: "I need a bandage" D: Inmate states he burned @ forearm & needs to cover the blister when working. D forearm C 1" raised blister, fluid filled. D S/S infection or redness. A: Assessed skin integrity R/O burn P: Band-aids given, to return p.o. if blister doesn't heal — M. Merlini
0730 3-23-02	A	NS	C-PAP machine inspected. All parts, tubing & filter intact. Inmate questioned: green button on top right as to its function. He stated there are no instructions on the sheet he has. He was asked by Nurse to bring sheet down & we'll check function of green button — J. Horton
5:30-00 0800	A	NS	To w/ L. for inspection of C-PAP machine, filter intact tubing & mask in appropriate condition. J. Horton
			CHONG HOLLYNBY-C

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
0820 3-30-00 F	24	PAC	<p>⑤ Pt seems sore/l lumpy pain @ shoulder releases up and compresses and down de-load Did my Tybrel but seems had no release. Seems "Freaks like my arm is disconnecting from my body"</p> <p>⑥ @ shoulder - arm occasionally x b sore but now has pain on axilla area also</p> <p>① Chest ② shoulder pain ③ Sore Ovaries</p>
S. CRAIG HOFFMAN PA - C			
11/15 3/30/00	A	nsy	<p>To go to CHLAW LAMP function at C-PAP machine - Appropriate use at this function. PL acknowledge with early</p>
7:45 3/30/00	F	nsy	<p>Seen by Dr. Elkin on telepsych Stateville</p>
0800 4/1/00	A	nsy	<p>referred inspecting C-PAP machine - JRM</p>
4/1/00 10/20	24	MD	<p>s/ There for @ shoulder jt - chronic since 1996 when he fell out of bed. of Right shoulder - Kessler over RC jt. 1/11 Tendonitis 1/ Schedule exp</p>


Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name: Smith, Kim

Inmate Number: CT 2162

DOB: 10-18-56

Institution: SCT Sm


Ronald Long, M.D.

Time	#	Abbreviation	
4/11/00 1005	24	MD	5/4t here for an injection. SC-452 completed prior to injection of A Tardemita 1/ Injection to 0.5cc 1 1/2 plain lidocaine + 0.5cc Depo-Medrol
			Ronald Long, M.D.
07/0 4-13-00	A	ny	To NL for C-PAP machine inspection, Filter Intake - Testing, back a mark in appropriate condition. <i>John</i>
07/0 4-20-00	A	ny	NL for C-PAP machine inspection. Filter intake. Testing a mark in appropriate condition. <i>John</i>
07/0 4-27-00	A	ny	NL for inspection of C-PAP machine, Filter intake - Testing a mark in appropriate condition. <i>John</i>

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
3-3-00 1420	B	RDH	Seen by De Janino in oral surgery clinic M. Whetstone RDH Mary Whetstone, R.D.H.
5-4-00 0830		NSg	inspection of C-pap machine. filter intact. tubing hose, mask in good condition. - Impression -
5-8-00	C	NSg. 17 ¹⁵	NL. missed 16 ³⁰ blood sugar - Was counselor at that time. D.A. Griffith, RNII
5/10/00	C	A 300 140	S: 434 BM who is diabetic W = 225 on Metformin x patient BP = 120/86 has pain in (L) chest. O: Exam & alert = Lungs equal exam clear bilaterally Q: regular Rate & Rht. No palp pulses & crackles base in (L) thorax A: One sup = p: see or des. DR. MIGUEL SALOMON M.D.
5/11/00	A	NSg	CPAP Machine checked - intact & all parts. D. Seelen
5-11-00 1705	F	NSg	Seen by Dr. Eltner on telemedicine - Statist

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name:

Smith, Kim

Inmate Number:

CT 2162

DOB:

10-18-56

Institution:

SCI-SMI

Time	#	Abbreviation	Subjective, Objective, Assessment, Plan
5/16/00 1200	20	PA-C	S) Not Seen; labs reviewed. O) GGT + 301 u/L A) + GGT = ? drug induced P) See Orders. <i>unBaker</i> MELINDA C. BAKER, PA-C
5-18-00 0730	A	NSg	C-PAP machine checked. all parts intact <i>L. Norton</i>
5-25-00 0710	A	NSg	C-PAP machine checked. all parts intact <i>L. Norton</i>
0730 6-01-00	A	NSg	ML to ✓ C-PAP machine. all parts intact. <i>measured</i>
0710 6-5-00	A	NSC	ML for Fastq BS. BS 83 — <i>initial</i>
6/7/00 1040	C	MD	S/ Pt here for follow-up of dialysis. No excessive thirst or polyuria. of VSS General - NAD Exam - stable A/E / Type 2 diabetes & insulin control V2 Cleared LFT's 1/11 Needs Hep A, B & C shots

Time	#	Abbreviation	Subjective, Objective, Assessment, Plan
6:15 AM 1/25	A	NSG	<p>⑤ spoke to inmate in H6 2° to inmate refusing to use C-PAP without an extension cord. Inmate says that for him to use C-PAP device without an extension cord puts the device at risk for damage 2° to falling off desk due to movements during his sleep. Also feels that there is a risk of electrical shock if used without a cord.</p> <p>⑥ After speaking to block officer about there are only 2 cells w/ electrical outlets, and the device could be used, spoke/counselled inmate on using the C-PAP device. Inmate very clearly understands that the C-PAP device would work; however he is choosing not to use it without an extension cord. Inmate claims to be looking for funds to purchase an extension cord, and says he will "submit a request/question to the deputy and then Medical will give him an extension and the problem will be solved." Again I explained to this inmate that the C-PAP device will work/function in the cell without an extension cord, and that he - Mr. Smith - is just choosing not to use it. Inmate says he understands but continues to want an extension cord. Refused to sign a DC-462 release 2° to his own choice not to use the C-PAP device ordered for him as a treatment for a diagnosis of sleep apnea. Inmate</p>
9/16/00 0750	A	MD	<p>It was discussed about acquisition of C-PAP by inmate.</p>
			Ronald Long, M.D.

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
6-22-00 0600	C	NSG.	FBS 78 via glucometer/fingertick. No diabetic S+S noted. <i>Sparky</i>
6-22-00 0730		NSG	C-PAP machine ✓ all parts intact DMJLW.
6-23-00	C	NSG	While passing AM lock-up med's - inmate stated "I need to have a snack bag @ night something done about my sugar. I'm waking up in the morning & the shakes & I have them until I eat something." Upon CR it is noted that this inmate had been on a 2000 kcal ADA diet but it was discontinued due to non-compliance. Will place on CR for MD to be aware. - L. Nauman M.D.
6-29-00 0730	C	NSG	C-PAP in property - not being used p last ✓ on 6/22/00. <i>L. Nauman</i>
7-6-00 0740		NSG	pt remains in lock-up. C-PAP in property. No need to check. <i>DMJLW</i>
7-13-00 0745	C	NSG	Pt remains in lock-up. C-PAP in property. No need to check. <i>L. Nauman</i>
7-20-00 0730	C	NSG	Pt in lock-up C-PAP machine in property. <i>L. Nauman</i>
7-26-00 0530	C	NSG.	FBS 79 via fingertick. No diabetic S+S noted @ this time. <i>Sparky</i>
7-27-00 0730	C	NSG	Pt in lock-up - C-PAP in property. <i>Sparky</i>
7-31-00 0730	C	NSG.	FBS 84 via fingertick. No diabetic S+S noted. <i>Sparky</i>

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name:

Smith, Kim

Inmate Number:

CT2162

DOB:

10-18-56

Institution:

Smithfield

Time	#	Abbreviation	Subjective, Objective, Assessment, Plan
8-7-00 0530	C	nsq	FBS 80 via glucometer/fingertick. No diabetic S+S noted. ——— SParksh
8/3/00 0530	C	nsq	C-PAP in property. No need for medical to ✓ equipment ——— J. Hatter
8-3-00 J 1300	C	8-3-00	A: Pt here for DM clinic. Reports day well. No complaints. No lightheadedness - No polyuria - No polydipsia - Current Rx - Micronase OS Wt- 221 BP- 110/80 Chest-clear Heart-regular Feet- No ed breakdown - A: DM P: Secorder Remy Muller
8-7-00 0545 8-8-00 1146	C 17	nsq PAC	FBS 88. No c/o noted ——— SParksh S) labo received O) ALT 58 U/L AST 48 U/L A) ↑ LFTS P) Sec Orders. ✓ Hep Panel. Never done from 6-00 order. Unbak
8-9-00 0510	C	nsq	FBS 77. No c/o noted ——— SParksh MELINDA C. BURKE, PA-C
8-10-00 0700	C	nsq	C-PAP in property. No need for medical to ✓ — J. Hatter
8-11-00 0530	C	nsq	FBS 74 this am. No c/o noted. ——— SParksh

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
0845 7-2000	A	my	[REDACTED]
9/27/00	A	mb	[REDACTED] Patient has read all the HCV material and expressed understanding of all the risk and benefits of A Chronic Hepatitis C P/+1 See attached Ronald Long, M.D. Ronald Long, M.D.
9/21/00	A	my	See H.C. - end up C. Papir machine Property - Not using [unclear]

[X] Outpatient

[] Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
872 9-15-00	72	PAC	<p>OP P. "S-11" long fullness - (P)</p> <p>Sched. provided some relief</p> <p>(O) Exam - red canal - (P)</p> <p>(A) ETD</p> <p>(P) See order</p> <p style="text-align: right;">S. Craig Hoffman PA</p>
91900 1102 (11)	22	PAC	<p>S) Pl on Sick call c/o "my [R] ear still is full"</p> <p>Pl seen 915-00 for same complaint. Pl denies otalgia. Currently taking Sudafed that does have some relief. Pl c/o "yellow drainage" from ear. Pl also requests the HIV test. Pl had neg. test 10/99. He denies any high risk behavior while incarcerated.</p> <p>O) N/A; [R] ear - ETD along tragus/pinna; canal clear & purulent drainage. TM intact @ fluid behind TM.</p> <p>A) ETD 1 Requests HIV test</p> <p>P) Cont. Sudafed until gone. [REDACTED]</p> <p>[REDACTED] The pm. M. Baker</p> <p style="text-align: right;">MELINDA G. BAKER, PA-C</p>

Progress Notes

Commonwealth of Pennsylvania

Department of Corrections

DC-472

Inmate Name:

Smith, Kim

Inmate Number:

CT-2162

DOB:

08-16-56

Institution:

SCTB

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
1600 9-2-00	G	NS	Engineer injector given D. Holcomb
9-5-00 0900	22	PA-C	<p>S) Patient on Sick Call c/o "[R] ear pain" x 3 weeks. Pt feels "a drainage from ear." Allergies: PCN, tetanus, Feldene Motrin.</p> <p>O) [R] ear - ⊖ pinna / tragus ttp; canal clear ⊖ erythema ⊖ edema; TM ⊕ fluid ⊖ ↓ light reflex</p> <p>A) ETD [R] ear</p> <p>P) See Orders. try decongestant. 1pm.</p> <p style="text-align: right;"><i>MELINDA [Signature]</i></p>
0925 9-12-00 5		PRE	<p>Pt refused to sign request form by refusing "sue him", stated he understands but still refuses to sign</p> <p style="text-align: right;">S. CRAIG HOFFMAN PA - C</p>
0750 9-14-00 H		PRE	<p>Pt returned sick call stating "I told Dr Long not to send you up here because you are in competent beyond"</p> <p style="text-align: right;"><i>[Signature]</i></p> <p style="text-align: right;">S. CRAIG HOFFMAN PA - C</p>

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
8/30/00 1015	G	MD	<u>Hepatitis C</u> #1 Patient was brought to the exam room by C.O.'s. I reviewed HCV & his He states he used IV drugs in 1980's (late). of a Chronic Hepatitis C. P/H Pt concerned about HCV - nature & length of treatment. He <u>does</u> want treatment. #2 Needs psychiatric evaluation #3 Will need HBV screen
			Ronald Long, M.D.
8/31/00 0745	A	MD	In(T) lockup - Pop machine in property D. Soren
8/31/00 1435	A	MD	<u>CR</u> BATS report received and reviewed. Minimum sentence 5/5/02

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name: Smith Kim

Inmate Number: C+ 2162

DOB: 10-18-56

Institution: Sm

Ronald Long, M.D.

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
8-16-00 0825	N/A	NSg	Called "J" block for knee support & lumbar support from inmates property. Medical was informed that 2-10 Officers are only allowed in property. Note to 2-10 Nurse line to call & acquire two items above S. Horton
0735 8-17-00	A	NSg	Image lock-up in J block. Does not have C-PAP machine in cell due to no electricity. J. RIBBY
8/21/00 1230	B	MS	Abnormal Lab/CR of Alpha-fetoprotein 17.2 ng/ml Hepatic Hepatitis C P/ Repeat C-man Ronald Long, M.D.
3115 8-22-00	NSg		Lumbar support & knee brace received from property J. Merline
0715 8-24-00	A	MS	Inmate in lock-up - C-PAP currently in property, no need for inspection J. Shu
8/24/00 0800	G	MS	Abnormal Lab/CR of HCV RNA 288,000 IU/ml " " 5.46 log IU/ml ALT 47 U/L H/H/ Chronic Hepatitis C P/H/ Pleurisy - pt Ronald Long, M.D.

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
8/14/00 1210	21	MD	S/ Pt seen at J - block. Doc not believe he is HCV (+) of A R/O HCV P1 #1 HCV viral load
8/15/00 1430	G	PA-C	S) not seen; abnormal labs reviewed. o) Anti-HAV, total (Positive) Anti-HCV, 2nd generation (Positive) HBs Ag (negative) Anti-HBs 1.7 A) HCV (+) P) See Orders. Pt has (+) HCV. Dr. Long ordered HCV-RNA viral load, AFP, & TSH. MELINDA C. BAKER, PA-C
08/16/00 J	T, 20	PAC	① Pt has review of review for back support and knee exams, pt is looking on J Block to look at property ② Derrismond ③ Equipment Review ④ Will DC both services

S. CRAIG HOFEMAN PA

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name:

Smith, Kim

Inmate Number:

CT 2162

DOB:

10-18-56

Institution:

SCI-SM

PROGRESS NOTES

☒ Outpatient☐ Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
9/27/00	23	PAR	5) Pt on Sick Call 4/0 "nasal congestion and (R) ear pain" x 1 week. Pt was seen previously for ETA AU, but states now it is worse. Pt denies fever, N/V, diarrhea, or cough. Allergies - feldene, Motrin, PCN, Ketanov. 0) NAD; ENT - (R) TM - Erythema Opulent drainage @TP along tragus; + light reflex. @TM - uNL; nasal turbinates boggy. Erythema pharynx - mild post nasal drip. Neck - Ppost-auricular adenopathy (R) heart - Regular lungs - Clear A) URI
			early AM (R) ear P) See orders. PRN if no improvement.
			W. Baker MELINDA C. BAKER, PA-C
9-27-00 1210	19	RDH	Seen in oral surgery clinic M. Whetstone RDH Mary Whetstone, R.D.H.
0743 9-29-00	C	NSL	Needs renewal of Micronase 5mg p.e. q AM + Micronase 2.5mg p.o. q PM. current order expires today. — h. Hansen II)

S. CRAIG HOFFMAN PA-C

16 Dec 22
0735 (F)

PA-C

S) Pt on Sick call c/o "my @ear is still popping" x 1 month. Pt also admits to rhinorrhea. Currently denies N/V, diarrhea, sore throat, or cough. Allergy - Feldene, Xanax, Motrin, PCN.

O) @ear - ETTP along tragus; TM @fluid. Erythema. Nasal turbinates - @boginess Erythema pharynx - clear

A) ETTP (L)

P) See Orders. Pt counselled that the fluid may not be relieved c/ Sudafed and may last 6-8 weeks. M. Baker PA-C

0800
10-15 W

Q

N

[REDACTED]

0800
10-15 W

A

Ng

LH has a C-pap machine in his possession.

JLB

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
10/2/00	D	PA-C	S) Patient seen on PA line to evaluate need for C-Pap, back support, & (L) Knee sleeve.
10/5/00	(A) 9		Pt states he "needs" all of these. PMH (L) sleep apnea, (L) knee DJD, + back pain. Pt states (L) knee "swells & hurts" when standing or jogging. Pt also c/o "low back pain". He denies paresthesias, lower extremity weakness, or bladder incontinence. Pt refused C-PAC due to "not having an extension cord." Pt wants the machine & C extension cord. Pt has not used C-Pap since 6-00 (see DC-462).
			O) (L) knee - (L) edema (L) erythema (L) crepitus (L) laxity (L) Mc Murray's (L) patellofemoral grind; Strength +5/5; NV intact. Spine - (L) erythema (L) edema (L) HTP (L) muscle spasm (L) SLR bilat; (L) DTRs +2/4; NL gait; NV intact distally.
			heart - Regular lungs - Clear
			A) (L) knee DJD back pain Sleep apnea
	(Cont)		MELINDA C. BAKER, PA-C LM Baker PA-C

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name: Smith, Kim

Inmate Number: CT2162

DOB: 10-16-56

Institution: SCI Smith Field

Time	#	Observation	Subjective, Objective, Assessment, Plan
10-24-00	D	PA-C	P) See Orders. Spoke to Dr. Long pt has not used
10-24-00	A	(cont)	C-PAA since 10-00 no need currently. Pt may
	9		use knee sleeve in ECU. No medical need
			for back support. Unbaker
			MELINDA C. BAKER, PA-C
1115 10-25-00 E	C	pae	③ Pt for DM, c have, doing well, weekly diet 50-50, tech skills very good. No urinary or vision problems reported Taking meds as directed ④ BP- 116/64 WT- 219 Neck- no JVD or bruits Lungs- clear Heart- RRRS Ext- NV intact ⑤ NEEDM ⑥ See Orders
			S. CRAIG HOFERMAN PA-C
1115 10-31-00 E	C	pae	① Labs back to T were normal, home well want for PA-C ② See 10-30-00 lab ③ NEEDM ④ Want for lab, see orders Well prob need ACE
			SL

Inpatient

S. CRAIG HOFFMAN PA - C

Inmate Name: 16m Sneh
Inmate Number: CT 2162
DOB: 1D-16-56
Institution: SCS

Time	#	Subjective, Objective, Assessment, Plan
11/8/00 (cont)	G M8	(cont) of General - no distress Heart - RR normal Lungs - clear Abd - soft & nontender GDS H/1 Chronic Hepatitis C + 2 Types of choleliths P/1 No change
11/11/00 11/27/00 1520	G 23 1520	11/8/00 Interferon inj. given @ arm. S. Shumaker I got a R sample and they took out my tooth. I had 30 d of antibiotics + chemo. Have many questions about LFT, interferon side and side effects. Chemo given in liver/stomach. No myeloma or other respiratory symptoms. RTD red blood serum white. Good wet excretion No common A ROM S/P Tilt Extraction Evaluation 11/11/00 P in qts + Keflex x 3 d bc. week S. Shumaker MD desires to continue Keflex injection

PROGRESS NOTES

[] Outpatient

[] Inpatient

Date/ Time	Prob #	Discipline Abbreviation	Remarks Subjective, Objective, Assessment, Plan
1300 12/01/00		Nsg	S) "No man, I'm okay." O) Received a phone call from control stating inmate recently locked up in H3 unit. Has post psych hx & on psych meds. Denies any C/o @ present. Denies thoughts of hurting self or others. No abnormal behavior noted. Good eye contact. A) Potential for Self Harm / Ineffective Individual Coping. P) Cont. to assess. ————— M Ewerby, RN —————
0700 12.7.00 11	23	PAK	③ Re ✓ as pt for FAR INTERVIEW, who approached cell, ask pt to hop up and run high on, PT stated "why do I have to get up just to preserve your fabulous longevity?" ④ Ø ⑤ Appears resolved on ⑥ FW PRN as pt responder
P/1400 09/10	FG MD		Hepatitis C S/ Pt continues to aching and fatigue & medication. "Regu"

S. CRAIG HOFFMAN PA

Progress Notes
Commonwealth of Pennsylvania
Department of Corrections
DC-472

Inmate Name:

Smith Kim

Inmate Number:

CT2162

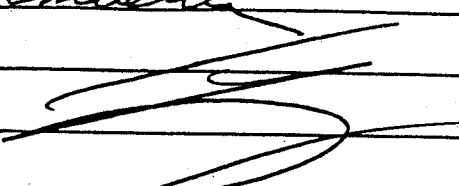
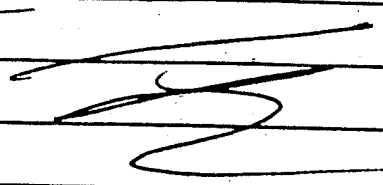
DOB:

10-16-50

Institution:

Sm

Ronald Long, M

12/20/00 (cont)	FG MD	<p>removal of Bupropion</p> <p>of A Chronic Hepatitis C</p> <p>P1 #1 Renew Bupropion</p> <p>#2 F/O - Dr. Volmuth</p>
		<p>Ronald Long, M.D.</p> 
12/24/00 F 1135	Bo	<p>S David Rhyon #2/23</p> <p>O MA</p> <p>A Hpl</p> <p>P gave dose taking from 12/23</p>
		<p>S. Shumaker IVL</p>
1/5/01 0820	A MD	<p><u>ck</u></p> <p>5/ φ</p> <p>o/ Pt has not used C-PAP</p> <p>for over a year. No</p> <p>condition worsening. Pt</p> <p>refused and signed DC-462</p> <p>on 2/2/00, 2/4/00 and 2/16/00.</p> <p>1/4 Sleep apnea</p> <p>1/4 D/C C-PAP - patient</p> <p>has been noncompliant and</p> <p>obviously does <u>not</u> need.</p>
		<p>Ronald Long, M.D.</p> 

S. Shumaker M.D.

PHYSICIAN'S ORDERS

Smith, Kim

CT 2162

10-14-96

SCI - Smithfield

Date/Allergies

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
4-12-99 1500	7	<p>① Chem Screen - fastig -</p> <p>② Zephromycin 250mg T po bid x 100p</p> <p>③ Lotremin Cc BID x 4wks</p> <p>④ Rec' 4wks</p> <p><i>Ray McMullen</i></p> <p>RAY McMULLEN, PA-C WHS</p>
4-15-99 1135	8	<p>① Rec' 250mg / Cc Lm Sacc Support x 6 months</p>
4-15-99 0905	7	<p>① Repeat Hepatic Panel L 3wks</p> <p>② Rec as pre scheduled</p> <p><i>Ray McMullen</i></p> <p>RAY McMULLEN, PA-C WHS</p> <p>Noted on 4-16-99</p> <p>Marlene M. Eneedy, RNII</p> <p>DR. MIGUEL SALAZAR M.D.</p>
5-1-99 0800		<p>① Please fwd recent Hep Pnl to Dr Long for Review</p> <p><i>Ray McMullen</i></p>

PHYSICIAN'S ORDERS

James L. Kern
 C.T. 1102
 10-11-96
 SC 2 A. 1/1/97

Date/Allergies: 5/10/99

Self Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
5-10-99 1200	7	<p>① Derm Consult</p> <p>② Micatin Cr BID x 600</p> <p>③ A&D oint BID x 600</p> <p>④ RetAcr</p> <p>Ray McMullen, PA-C WHS</p> <p>Marlene M. Eneedy, RNII</p> <p>Ronald Long, M.D.</p>
5/20/99 1500	21	<p>① D/c dermatology consult</p> <p>② Schedule c me 5/24</p> <p>Ronald Long, M.D.</p>
5/24/99 0910	21	<p>① Please pull 1986 record for me to review</p>

PHYSICIAN'S ORDERS

Smith, Ken

CT2162

10 - 16 SL

2003

Date Allergies MOTRIN, PCW, FELBENE
TETANUSSelf-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
5/24/99 0940	A	① Arrange CPAP for pt - settings at 7 cm water
1045 8/16/99 E	910	① Cough Suck Syringe x 1 yr ② Cough Suck Syringe x 1 yr
		S. CRAIG HOFFMAN PA - C
1035 9-24-99 F		① KUB, CAC exam, Cholesterol, UA, EKG ② V w/weight Q wk x 6 wks ③ A+D ointment applied to rectum QD x 5 days, Re x 12 ④ Lidocaine Cream applied to skin before B2D PM x 5 days E 15g - Re x 5 ⑤ Naproxen 500mg TID PO Q12H PM x 5 days Re x 10 ⑥ Medrol 11 tabs as over or MA + 1 tab Q10A PM up to 5 daily or 12 weekly x 5 days, Re x 2 ⑦ Bactrim 800/400 TID B2D x 30 days
		S. CRAIG HOFFMAN PA - C

9/24/99
C1105

PHYSICIAN'S ORDERS

Smith, Kim

C T2162

10-16-56

S.C.I. Smithfield

Self Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	
9/27/99 2045		Accu check now & phone results po Dr Mohadjern / R. Sasser
9/27/99 2115		Humulin R 8 units SA now <i>[Signature]</i> 9/28/99 @ 0830 To see Dr Long in am Nothing to eat/drink until seen by Dr Long in am po Dr Mohadjern / R. Sasser <i>[Signature]</i> 9/28/99 @ 0830
9/28/99 1030 not 9-28-99 1100 military		① Admit to the infirmary Ronald Long, M.D. <i>[Signature]</i>
10/4/99 1155		① Discharge to block ② new onset DM ③ Activity - ad lib ④ Diet - 2500 cal RDA x 90 d. ⑤ CPAP at 7cm H ₂ O bedtime - indefinitely - Hold per S. Wallace TO 10/14/99 ⑥ Mucronase 5.0g po q AM } 180 ⑦ " " 2.5g po q PM } drops ⑧ Bactrim DS 2 po bid until 10/14/99

PHYSICIAN'S ORDERS

S.M.M. KM

CT 2162

10-16-56

SCIS.M.

Dues Allen, M.D., PCN, Felene
TetanusSelf-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	Comments
10/3/99	11	Share Hare accident at 2200 hr at 2030hr 20 DR. MIGUEL SALOMON M.D. <i>Mig</i>
10.7.99	1335	flu vaccine 0.5cc IM Oct 99 per V.O. Dr. K. Long / M. Long <i>Ronald Long, M.D.</i> 10/7/99 21400
10/12/99	0815	① No insulin coverage ② Acetaminophen at 0700, 1100, 1600 4 2000 per on M-W-F x 2 weeks <i>Ronald A Long, M.D.</i>
10/20/99	8	① Schedule me 10/25 <i>Ronald Long, M.D.</i>

PLEASE USE BALL POINT PEN ONLY

PHYSICIAN'S ORDERS

Smith, Kim

CT 2162

10-16-56

SCI-Smithfield

Medication: Motrin, PCN, Feldene, Tetanus

Self Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	
11/9/99 0740	C	① Fingertick acupuncture - fasting and 1400 hrs Monday and Friday weekly. x 12 wks
11/13/99 H/1	C	① UA + U. culture ② Septra DS 1 PO BID pr 10 days start today ③ CBC + BUN + creatinine + electrolytes ④ Advice to call back if any changes ⑤ Follow up in 7 days
11/22/99 0800	C	① Add to Diabetic Clinic - done ② Urine for microalbumin ③ Hg/H/C (glycohemoglobin) ④ Pneumovax 0.5 cc IM x 1

Ronald Long, M.D.

Ronald Long, M.D.

PHYSICIAN'S ORDERS

Smith
 Ct 2162
 10-16-56

Drug Allergies:

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
12/30/99 0740	E	① Lidex cream - apply to shoulders bid [60 gms/month] x 3 mo
12/31/99 0740	8	② Lotrimin cream - apply to both feet bid [45 gms/month] x 3 mo
		Ronald Long, M.D.
1/4/00 0730	C	① 2500 calorie ADA diet x 90 days
		Ronald Long, M.D.
1/9/00 0940	2, 22	① F/U PA line
		Ronald Long, M.D.
1-20-00 0910		① A+D Centric to feet T2 x 30 days 120gms
		1/20/00 e 1245 Ronald Long, M.D.
		S. CRAIG HOFFMAN PA - C

GT 2/62
Smith Kim
107656
Smithfield

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	
2/5/00 1100	11	glucotack fasting and 400 mc. w/d. w/d. x 1 day for 2 months DR. MIGUEL SALOMON M.D.
2/5/00 1100	11	① Flg A.C. ② Accurcheck FBS Fasting + 16w & Monday x 12 wks
3-2-00 1925	11	D/C 2500 Kcal ADA diet due to non-compliance. Verbal order Dr. Long / K. Allen RN, BSN noted 3-2-00 @ 1925 K. Allen RN, BSN Ronald Long, M.D.
3/16/00 830	18	①

PHYSICIAN'S ORDERS

Patient Name: Smith, Kim

Patient Number: CT 2162

10-16-56

SCI-Smithfield

Drug Allergies: PCN, Friedberg, Morphine, Tarant

Self Medication Program ☒ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
0745 3-6-00 F	2-1	<p>① Tylenol 325mg po Q4H PRN x 5 days R x 3</p> <p><i>[Signature]</i> 3/6/00 e1300 Ronald Long, M.D.</p> <p><i>[Signature]</i> S. CRAIG HOFFMAN PA - C</p>
3/16/00 030 F	18	<p>① Sudafed 30mg T po Q8^h x 10 days</p> <p>② Robitussin DM TSP po Q6^h PRN cough x 5 days</p> <p>③ Salt H₂O gargles TID x 3 days <i>[Signature]</i></p> <p><i>[Signature]</i> 3/16/00 e1415 Ronald Long, M.D.</p> <p><i>[Signature]</i> MELINDA C. BAKER, PA-C</p>
3/22/00 0800 F	E	<p>① Lidex cream - apply to shoulder b.i.d. [60 gm / mo] x 3 months</p> <p>② Lotrimin cream - apply to both feet b.i.d. [45 gm / mo] x 3 months</p> <p><i>[Signature]</i> Ronald Long, M.D.</p>

PHYSICIAN'S ORDERS

Smith, Kim

CT 2162

10-16-56

SCI Smithfield

Drug Allergies: PCN, FELADNE, METRIL
TETANUS

Self-Medication Program ☒ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
0625 3-30-00	29	<p>① ES Tylenol tablets PO Q 8hr PRN X 5 days. R-X 2</p> <p>② X-ray ② shoulder</p> <p><i>[Signature]</i> 3/31/00 e 0700</p> <p>Ronald Long, M.D. S. CRAIG HOFFMAN PA-C</p>
0830 3-30-00	C	<p>Macro 5mg PO QAM X 180 days</p> <p>Macro 2.5mg PO QPM X 180 days</p> <p><i>[Signature]</i> 3/31/00 e 0700</p> <p>Ronald Long, M.D. S. CRAIG HOFFMAN PA-C</p>
0840 3-30-00		<p>PPD 0.1 ml I.D. 4-00</p> <p>V.O. De Long / P. Beeler R</p> <p><i>[Signature]</i> 3/31/00 e 0700</p> <p>Ronald Long, M.D.</p>
4/6/00 0930	24	<p>① Schedule 2 me 4/10</p> <p>re ② shoulder pain</p> <p><i>[Signature]</i></p> <p>Ronald Long, M.D.</p>
		<p>Noted M. Medley R 4-06-00 0940</p> <p><i>[Signature]</i></p> <p>Ronald Long, M.D.</p>

PHYSICIAN'S ORDERS

Inmate Name: Smith Kim

Inmate Number: CT2162

DOB: 10-16-56

SCISM:

Drug Allergies: PCN, Feldene

Motrin, tetanus

Self-Medication Program ☒ Yes ☐ No

DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

Date/ Military Time	Prob #	
4/19/00 24 1030		① Schedule for me 4/11 w/ injection ② Schedule
4/19/00 1045		Ronald Long, M.D.
4/19/00 24 1045		① Tylenol ES if p.o. bid per pain [12/week] x 6 months
4/19/00 1045		Ronald Long, M.D.
4/21/00 0845 #13		① Erythromycin 500 mg x 10 days ② Start today
4/21/00 0845		Amrit Kullar, D.M.D.

PHYSICIAN'S ORDERS

Smith, Kevin

CTA 62

10-16-56

SCI Smithfield

Drug Allergies: Pen, Folic acid
Mup. to be used

Self-Medication Program ☒ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
5/10/00	1	glycothg. + Hg A.c
3007	2	glucosack fastay Twice a week for 2 months
	3	CBE + chew probab.
	4	Lobruin cream apply to both feet for 60 days
	5	Get 2000 Cal and Hg snack for 180 days
	6	Calcium tabs 500 PD QD for 30 days
	7	Follow up H.D. line at 4 weeks

5-10-00 15:30

DR. MIGUEL SALOMON M.D.

4168-0616-7306 ©1997, Moore® All Rights Reserved - 0

PHYSICIAN'S ORDERS

Inmate Name

Smith

Inmate Number

CT 2162

Inmate

1016-56

Inmate

Sci Smith

Drug Allergies:

pcn, feldene, motrin, letamur

Self-Medication Program ☒ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
5/16/00 1200	28	(1) HP #1 3 months UN/Baker
		MELINDA C. BAKER, PA-C
6/7/00 1045	28	(1) Hepatitis diagnosis (#5585) above lab work ordered 5/16
		Ronald Long, M.D.
6-14-00 1825	C, 25	D/C 2000 cal ADA diet due to chronic non-compliance.
		Verbal orders Dr. Long / K. Allen RN-BSN, C
		Ronald Long, M.D.
6/23/00 1000	C	(1) Fastig acumbus m-w-f x 2 weeks
		Ronald Long, M.D.

PHYSICIAN'S ORDERS

Inmate Name

Smith, Ken

Inmate Number

CT2162

Date

10-16-56

Signature

Son

Drug Allergies:

PCN, Feldene, Motrin, Ketanes

Self-Medication Program ☒ Yes ☐ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

6/28/00

11/10/00 #5

Referral to Oral Surgeon

Amrit Kullar, D.M.D.

Noted on Meds 6-26-00 1125

7/5/00

Buspar 15mg Po Tid please give him the pill, i.e. do not crush or dissolve in water. (unless he does something to the pill from that he shouldn't, like burn it + snort it.) OK to water him swallow the pill.

please arrange if possible for him to receive his C-Pap.

Re-eval in 2 months / PRN

Signed RN 7/5/00

1635

7/7/00

0740

7/7/00

0741

Harrison

RONALD A LONG, M.D.

4168-0616-7306 ©1997, Moore® All Rights Reserved - 0305m

PHYSICIAN'S ORDERS

Inmate Name: *Smith, Kim*Inmate Number: *CT 2162*DOB: *10-16-56*Institution: *SCI-Smithfield*Drug Allergies: *pen, Feldene, Motrin, Tetanus*Self-Medication Program ☒ Yes ☐ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

7/13/00

0910 #1

7-13-00

0910 #1

7-13-00

0910 #1

7-13-00

0910 #1

7-13-00

0910 #1

7-13-00

0910 #1

7-13-00

0910 #1

7-13-00

0910 #1

7-13-00

0910 #1

7-13-00

0910 #1

*4 D/c referral to OS**Amrit Kullar*

Amrit Kullar, D.M.D.

7/17/00

22

1150

7-17-00

1150

7-17-00

1150

7-17-00

1150

7-17-00

1150

7-17-00

1150

7-17-00

1150

*① Lotrimin cream to feet bed
x 60 days*

Ronald Long, M.D.

7/24/00

c

0900

7-24-00

0900

7-24-00

0900

7-24-00

0900

7-24-00

*① Accutane M-W-F weekly
x 4 weeks*

Ronald Long, M.D.

8-3-00

c

8-3-00

8-3-00

8-3-00

*① Condon Diabetes clinic**REMPERLAGE**50 Smerlin RD 8/3/00 1415*

PHYSICIAN'S ORDERS

Smith Kim

CT2162

10-16-56

SCISMIA

Drug Allergies PCN, Feldene, Motrin
Tetanus

Self-Medication Program ☒ Yes ☐ No

DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

Date/
Military
Time

Prob
#

8/4/00 ① Cephalexin 500mg x
0930 10 days
OID

[Signature]

Amrit Kullar, D.M.D.

8-8-00 17 ① Hepatitis Panel
1145

MELINDA C. BAKER, PA-C

Noted in med log 8-08-00 1210

8/10/00 17 ① Schedule 2 me 8/14/00
0930 w pt request

Ronald Long, M.D.

8/14/00 27 ① HCV-RNA viral load
1210 ② Serum AFP
③ Serum TSH

Ronald Long, M.D.

4168-0616-7306 ©1997, Moore® All Rights Reserved - 0305m

PHYSICIAN'S ORDERS

Inmate Name: Smith, Kim

Inmate Number: CT2162

DOB: 10-16-56

Institution: SCT - Smithfield

Drug Allergies: PCN, Feldene, Metin
TetanusSelf-Medication Program ☒ Yes ☐ NoDO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

Date/ Military Time	Prob #	
8-15-00	G	① Chart Review for Dr. Long - labs.
1430	(J)	noted 8-15-00 1455 <i>[Signature]</i> <i>[Signature]</i> MELINDA C. BAKER, PA-C
8-16-00	9, 20	① DC Lumbar Support + Knee Stance
8-16-00		<i>[Signature]</i> S. C. Hoff
8-24-00	G	① HPT
1230		② Simon AFP > 7/01
8-24-00		Ronald Long, M.D.
8-24-00	G	① Schedule - me 8/28
0800		re: HCV
		Ronald Long, M.D.
		Noted in Emergency 8-24-00 0830

4168-0616-7306 ©1997, Moore All Rights Reserved - 0305m

PHYSICIAN'S ORDERS

Inmate Name: *Smith, Kim*Inmate Number: *CT 2162*DOB: *10-16-56*Institution: *SCI-Smithfield*Drug Allergies: *PCN, Feldene, Motrin, Tetanus*Self-Medication Program ☒ Yes ☐ NoDO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWSDate/
Military
TimeProb
#

⑤

8/30/00
*1045**G*

① Please give informational packet on Hepatitis C to pt.

② Psychiatric referral re: HCV treatment

③ CR to me after psychiatric referral is complete

④ DATS report (Nadine)

⑤ Sentence (Nadine)

⑥ Enquiry (pediatric) 1 cc IM now in 7 months & again in 6 months

Ronald Long, M.D.

Noted Mandy R. 8:30 00 1200

9-5-00
900

⑤

① Sudafed 30mg T po TID x 5 days. In Baker R

MELINDA G. BAKER, P.A.C.

Noted Mandy R. 9:05 00 0930

*9/6/00**e 0840*

Ronald Long, M.D.

9/7/00
*1000**C*

① Fasting and 1600 hr assessment M - W - F 2 week X 8 weeks

PHYSICIAN'S ORDERS

Aldene, Ictanus, PCN
 Drug Allergies: Molin

Smith, Keri

CT-2162

10-16-54

SCIS

Self-Medication Program ☒ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
9/7/00 1300	19	Referral to Oral Surgeon Amrit Kullar, D.M.D.
9/15/00 1400	22	(1) Subacute Gony PO BID x 5 days S. CRAIG HOFFMAN PA-C
9/18/00 1400		Bupropion 150 mg PO, once a day x 50 days Follow up 4 weeks Contact in 9/18/00 1650 Eugene Polmueller, M.D. Psychiatrist MELINDA C. BAKER, PA-C
[REDACTED]		
Noted in Emedy, 2/9-1700 1120		

CT 2162

10-18-56

PCN-Motiv

Zeldene-Tetanus

Coal Township

DB

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	
4/4/01 0200	2	Podiatry Consult re. Tinea Pedis med. L. re. Bunion, difficulty in shoe fit.
		Don Miller PA-C
		4/11/01

PHYSICIAN'S ORDERS

Inmate Name: *Smith, Kim*

CT 2162

10-18-56

Coal Trap

DB

PCN - Motrin

Relieve-Tetanus

Self Medication Program ☐ Yes ☐ No

Date/
Military
Time

Prob
#

*1/1/01 9. Interferon A. 3 ml units S.F.
3x/wk. ① x 30 d
Bacriminiboy 3 d ① ②*

*P. C. BREEN M.D.
9/16/01*

7/7/01 2500 cc ADF due

P. C. BREEN

9/10/01 F Burpar 10 p Q fine 1

Burpar 15 p Q fine 4

Sine gran 100 p am bed

Vistaril 125 p Q HS

ATC 5 wk

x 35 days

*9/10/01
1900*

PHYSICIAN'S ORDERS

Drug Allergies: feldene, tetanus, PCN
motrin

Smith, Kim

CT-2162

10-16-56

SCIS

Self Medication Program ☐ Yes ☐ No

DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

Date/ Military Time	Prob #	
7/4/00 0830	G	① Schedule c me 9/22 re: HCV
7-11-00 0835 15hr		Ronald Long, M.D.
9/22/00 1030	G	① Roferon 3 million units SQ Three times weekly on Tuesday, Thursday and Saturday x 180 da ② Ribavirin 600mg po bid x 180 da ③ CBC on 10/10 and 10/23 ④ Serum AFP (#1851) in February, 2001 ⑤ Serum TSH (*0305) in 8/01 ⑥ HCV RNA quantitative level (*6548) in February, 2001 ⑦ H P #6 in February, 2001 ⑧ Security drug screen 3 months in December, 2000; March, 2001; June, 2001 and September, 2001 ⑨ F/U in 1 month ⑩ Lotrisone cream to feet bid x 90d.

PHYSICIAN'S ORDERS

Feldene, tetanus, PCN, motin
Drug Allergies:

Smith, Kim
CT 2162
10-16-56
SCI-SmI

Self Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
9/27/00	23	① Bacrim DS i po BID x 10 days
0745(H)	18	② actifed i po BID x 5 days
9-27-00		9/27/00 C 1330 Melinda C. Baker, PA-C
		Ronald Long, M.D.
9/27/2000	1200	DC Tylenol Standing order today Tylenol #3 i QID x 3 days make Tylenol #3 refills cancel standing order for Tylenol Caplets 500 mg II caps BID P.R.N. Stephen Yovino D.M.D.
9-27-00	1310	Amrit Kullar, D.M.D.

PHYSICIAN'S ORDERS

Inmate Name: Smith, Kim

Inmate Number: CT 2162

DOB: 10-16-56

Institution: S.W. Smith L.H.C.

Drug Allergies: Penicillin, Tetanus, PCN, MCH/V

Self-Medication Program ☐ Yes ☐ NoDO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

Date/ Military Time	Prob #	
9/29/00	C	(1) Micronase 5mg po q AM
0750	C	(2) Micronase 2.5mg po q PM
		180 days
		Ronald Long, M.D.
9/24/00		
10-10-00	22	(1) Sudafed 60mg i po TID x 14 days
0735A		UMBaker PA
		MELINDA C. BAKER, PA-C
10-12-00		Ronald Long, M.D.
10-24-00	D	(1) large knee sleeve (knee x 180 days
10-30	(ECN)	UMBaker PA
		MELINDA C. BAKER, PA-C
		K. Colough
		10-24 1700
10-25-00	C	(1) V Flu Vaccine 0.5ml IM 1/0
		(2) V Urine for Micro Albumin
10-25-00		(3) V Ag, A, C, VDM Eye Exam 4/00
10-25-00		(4) V Fentanyl + (100) new check 2 wks x 12 wks
		S. CRAIG HOFFMAN PA -

PHYSICIAN'S ORDERS

Smith, Kim

CT 2162

10-16-56

SCI Smithfield

Drug Allergies: *Fc/dens, Tetanus, Pen, M. 10/12*Self-Medication Program ☐ Yes ☐ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

10/31/00 G (1) Schedule 2 me 11/2/00
11/0 re: HCU F/U

Ronald Leng, M.D.

Noted in Med. 10-31-00 1130

11/05
0310
E

C (1) PA Lave 11-8-00 re 7 hr

Noted in Med. 10-31-00 1145

0715
11-1-00
E

23 (1) Pz needs (2) re Elusoid until clear today
(2) Corresponding OTC Sleep 5 grs A.D. B.D. x 7 days
(3) Keflex 250mg PO QID x 10 days

11/1-00

S. C. L. P. M.

11/1-00

11/1-00

Ronald Leng, M.D.

PHYSICIAN'S ORDERS

Smith, K.W.

CT 2/62

10-16-56

Shumaker MD

Drug Allergies: feldene, Tetanus, Pen, M. H. V.

Self-Medication Program ☐ Yes ☐ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

11/2/00 C ① Fentanyl as needed x weeks
11/10 X 12 weeks

G ② Tylenol 500mg tid prn
[# 20 per week] x 12 weeks

G ③ Me 4 weeks

Ronald Long, M.D.

11/27/00 22, 23/ Keflex 500mg po tid x 30 d
1505 Cortisone line 12/6

15 Cortisone 2 qth AD bid x 30 d

S. Shumaker MD

12/18/00 G, ① Schedule 2 me 12/21/00
0750 ne pt request

Ronald Long, M.D.

PHYSICIAN'S ORDERS

Smith, Kim

CT2162

10-16-56

S. I. Smith, M.D.

Drug Allergies: Seldene, Tetanus, Pen. mch. ~

Self-Medication Program ☐ Yes ☐ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

12/23/00 F ① Buspar 15mg po 8 AM, noon
and 4 PM daily x 90d.

12/22/00 FG ② F/U w Dr. Palmueller
re pt on Buspar and Hepatitis
C treatment

12/22/00 FG ③ F/U w me 4 weeks

Ronald Long, M.D.

12/24/00 F Referon 3 million U SQ X 1 please give dose from
12/23/00 tonight then resume normal schedule

S. Spumaker MD

1/5/01 A ① D/C C-PAP

Ronald Long, M.D.

PHYSICIAN'S ORDERS

Smith, Kim

CT 2162

10-16-56

SCI- Coal

DA

P.H. 400

Feldene, Tetanus, Rx,
MOTRIN

Drug Allergies:

Self-Medication Program ☐ Yes ☐ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

11/10/01

F

Bumex 15mg tabs T tab. tid x 7 days

11/10/01

F

T. D. Smith / Kim Smith (M.D.)

11/10/01

G

Glyburide 2.5mg tabs T tab. qid x 1 day

11/10/01

G

Glyburide 5mg tabs T tab. q Am x 1 day

11/10/01

G

Rebex 600mg caps - III caps (600mg) Bid x 1 day

11/10/01

G

Rebex - A. V. 9ml - Inject 0.3ml - 3x a week (1m 1m 1m) x 1 day

11/10/01

G

Gestaminophen 500mg caps - II Bid (1m 1m 1m) x 1 day

11/10/01

G

Engov B Danc / J. Smith

11/10/01

G

T. D. Smith / Kim Smith (M.D.)

11/10/01

G

JOSEPH KORT, M.D.

11/10/01

G

1-11-01

1-11-01

G

Glyburide 2.5mg T tab PO qd lin 3

0830

G

Glyburide 5mg PO qd (1)

1-11-01

G

Rebex 600mg PO Bid

1-11-01

G

Interferon 3.0 units u S.C. (1m 1m 1m) x 30 d

1-11-01

G

CPL, cher 14 u 4 weeks

1-11-01

G

MD in 4 weeks

1-11-01

G

JOSEPH KORT, M.D.

1-11-01

G

11/11/01

1-11-01

G

16/5

PHYSICIAN'S ORDERS

Smith, Thim
CT 2162
1846-56
CAL

RH 0A
400

Drug Allergies: Felidene, Tetanus, PCN
Motrin

Self-Medication Program ☐ Yes ☐ No

DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

01/16/01 F & Naprox 10mg po BID x 30d x 60 doses
750 RTD 1 MD

Andrew G. Newton, M.D. DABPN

1/22/01 23,24 - EKG - done
- Bactrim DS - po bid x 14 self med.
- refer M. DI - time sch 1/29/00 done

Brian Brown, PA-C

1/23/01 D Tidal 325g H tabs po tid x 7 days (4h) - self med given
0930 2d Talcrite 1% cream apply topically bid x 30 days

BRADLEY LORAH, PA-C

M Shingyck
1/23/01
1630

PHYSICIAN'S ORDERS

SMITH, KIM

C12102

10/18/1936

SCF 4T6

D2

Drug Allergies **FELOENE, TETANUS, PCN, MOTRIN**

Self-Medication Program ☐ Yes ☐ No

Date/
Military
Time

Prob
#

DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

12901 Hep C Vh Quantitate on next lab - on lab ✓
1000 G V knee pain X 6 mos - wound ✓
HC 10/2 apply Bid po V E3 X 20
RF to lab bid X 300 already ordered until 8/2
NO weight loss by 11/20/01 ^{planned work}
[Redacted] Joseph Kort, M.D.
to Corvise

2/7/01 0 Cpt. Kelly Corvise ✓
1030 21 Tylenol 325g + risks po bid x 10 days (40) G.H. ✓
BRADLEY 1030
2/7/01 1800

2/8/01 9:00 am ✓
20815 Interferon 3, weller u S.C. Tue, Thurs, Sat X 30
Pibivirin 600mg PO Bid X 300
CBC 9m
HFT, T4, TSH, Hep C V, L 9 3u
MD exam in 3 months
JOSEPH KORT MD

PHYSICIAN'S ORDERS

Feldene, Tetanus, Rx
Drug Allergies: motrin

Smith, Kim
CT 2162
10.18.56
SCU CT

DA

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
2.8-01	G	dc Interferon
0900		dc Rubarou
		dc CBC gm ✓
		dc LFT, T4, TSH Hep CVL 9.3m ✓
		dc no 9.3m (for HepC) ✓
		JOSEPH KORT, M.D.
		2/8/01
		1700
02/13/01	F	Bmp par 1Dmp pr BID X 30d x 60d
1525		RTC 1DMP
		ANDREW O. NEWTON, M.D. DABEN
		2/13/01
		1600
3-2-01		Keflex 250mg QID x 7 days tabs #28 issued Selfmed
14:30		EDWARD A. SCHETROMA, D.M.D.
		3/2/01
		1650
		Notes D. Berton
		3/2/01

PHYSICIAN'S ORDERS

Inmate Name **Smith, Kim**
CT 2162
10/18/56
SCI-Coral

DA

Drug Allergies: **Feldene, Tetanus, Pen**
motrin

Self-Medication Program ☐ Yes ☐ No

DO NOT USE THIS SHEET
 UNLESS A RED NUMBER SHOWS

Date/ Military Time	Prob #	
3/12/01		Acu 9am ✓
0700 C		FBS + productivity 93m ✓
		UR, ches 14, 14hac, microcell 96m ✓
		lipids and retinal exam 9g ✓
		<i>Joseph K. Newton, M.D.</i> 3/12/01 1600
3/12/01 F		bupropion 10mg po BID x 30d x 60 dose
0855		RTC 1mo ✓
		<i>Andrew D. Newton, M.D. DABPN</i>
3/21/01		Colchicine bid x 30d May self med
0950		<i>Andrew D. Newton, M.D. DABPN</i> 3/21/01 1700

Smith, Kim

CT-216.2

10-18-56

SCI COAL TOWNSHIP

Self-Medication Program ☐ Yes ☐ No

1

Prob #	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

Administer PPD 0.1 ml. intradermally

04-01-01

0830

Joseph Kort, MD

4201

PHYSICIAN'S ORDERS

NAME Smith, Kim

MR. CT 3162

10/12/56

COAL

DR

Drug Allergies: Tildiem, Jettam, PCN, M. K.

Self-Medication Program ☐ Yes ☐ No

Date/
Military
Time

Prob
#

DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

4/2/01 - M.D. line
1000

DR. BROWN

Brian Brown, PA-C

M. Shuyock

4/2/01 1700

4/12/01

1040

CBC

CHEM PROFILE / LIVER FAN TESTS - 16

THYROID FAN TESTS.

MD LINE 4/9/01.

NOTED

Discontinued FOLIC
4/3/01

NOTED D. BOSTON
4/13/01 1500

4/10/01

0900

ACCV 8 W/RY (ALTERNATING FASTING
C (RE-DINNER) X 3 DAYS

MD LINE 1 MONTH

5/4/01

DR. SHAWN MCGLAUGHLIN

DR. BROWN
4/11/01

NOTED
4/14/01
1000

PHYSICIAN'S ORDERS

Smith, Kim

CT 2162

10-18-56

SCA CT

DA

Eldene-Tetanus-Pw-Motex

Drug Allergies:

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
4/9/01	F	Buspar 10 μ BID x 30 days x 60 doses Vicknil 25 μ PO Q HS RTE 4 wks
4/9/01	1030	
4/9/01	1000	Hep C Clinic: Interferon A 3ma SQ 3X/wk Tues, Thurs., Sat. } x 30 days Ribavirin 600mg PO BID P.O. } on line
4/9/01	1000	CBC q 2 weeks, 4 weeks, 6 weeks and 8 weeks p starting Tx.
4/9/01	1000	MD line monthly while on Tx. sch 5/9

DR. BABAR CHAUDHRY

8/21/01
4/9/01
1700

PHYSICIAN'S ORDERS

Smith, Kim

CT 2162

10/18/56

CASH

Drug Allergies: Telldem, Telenu, PCN, AntimSelf-Medication Program ☐ Yes ☐ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

4/10/01

① Hep C Protocol Bloodwork

1835

② M.D. - Line you week - (↑ FBS, ↑ T₃, ↑ RBC, ↑ Hg)

4/11/01

① ↑ Glyburide 10mg P.O. in am x 90 days

0825

② ↑ Glyburide 5mg P.O. in pm x 90 days

4/19

③ FBS in 7 days

④ Accu V on 4/13/01

⑤ Accu V on 4/30/01

⑥ Refer to M.D. Line in 7 days for ↑ RBC, ↑ HgB

James Siana D.O. / Siana

4/11/01

- ✓ CBC, Chem 14, GGT, Thy. panel,

1130

- ✓ EKG

⑦ Robert
Boswell
4/11/01
1145

BRIAN BROWN PAC

PHYSICIAN'S ORDERS

Smith Kim
CT 2162

10/18/56

C.T.

Drug Allergies:

Self-Medication Program ☐ Yes ☒ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

4/17/01

II

MD

2500 Cal ADA diet X 30d

online

1350

glyburide 10mg qprt X 90d

online

D/C chronic glyburide 5mg qprt

accu ✓ now 29 D/C previous accu ✓ order

accu ✓ 3 BID X 7d ① ③

MD live 10d

sched 4/27

Adams/Adams

4/17/01

MD

TFT

6/6/01

m lab (Jones)

Adams/Adams

450

M. Shureck R

4/17/01 1700

4/20/01

I

-

Glyburide 10mg ipso a.m., ipso p.m. X 90d

0820

b - b PR

Brian Brown, PA-C

4/24/01

I

-

tetracycline cream bid X 30d

0750

refer M.D. line - diabetes

b - b PR
Brian Brown, PA-C

PHYSICIAN'S ORDERS

Smith, Kim

CT 2 / 6 D

10 / 18 / 56

SCI Coal Tur

RHU1-6

Drug Allergies:

Self-Medication Program ☐ Yes ☐ NoDate/
Military
TimeProb
#DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

4/2/01

Dr. McLaughlin, to review accu-
F/DIC, previous M/D low refer
M. Shurack
4/26/01
1711

4/30/01

7/10

(I)

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

+ 0.5 to 1.0

START GLUCOPHAGE 850 mg

TID x 30 days

Fasting accu in ONE WEEK.

Hem 8 in 10-14 days.

M. Shurack

4/30/01

1710

DR. SHAWN MCGLAUGHLIN

5/7/01

F

1545

Vistair 25 mg PO QHS

Purspan 10 mg PO BID

Rtc 5 wks 6/1/01

x 37 days.

M. Shurack

5/7/01

1532

Dr. Babar Chaudhry

5/7/01

1500

PHYSICIAN'S ORDERS

Smith, Kim

CT 2162

10-18-50

Coal

AB
RX
T-06

Hidene, Tetanus

Drug Allergies:

PCN, Motrin

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
5/9/01 0815	(G)	INTERFERON A, 3 MILLION UNITS 5x WEEK TUES, THURS, SAT RIPAVIRIN 600 MG PO BID MD LIFE 0 MONTH ✓ ALPHA FETO PROTEIN LEVEL (5/11)
5/9/01 0700		DR. SHAWN MCGLAUGHLIN
5/14/01 0735	I	ADA 2500 dit K200 mistaken Anty Brian Brown M.D. 5/14/01
5/16/01 0800		Lotimin cream 1% bid to feet May self med x 30 DR. SHAWN MCGLAUGHLIN 5/16/01

Smith, Ken
CT 2162
10-18-56
Coal Troop

Drugs: Beldare-Tetanus
PCN-Motrin

Date/ Military Time	Prob #		DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
4/7/01		D/C TOLENE	
5/19/01		DR. SHAWN MCGLAUGHLIN	Dr. Shuey 5/17/01 1630
5/21/01	I	GLUCOPHAGE 850 mg Po BID x 90 days O.C.	Shawn McGlaughlin, M.D. Dr. Shuey 5/31/01 1700
6/4/01	I	2500 DIABETIC x 30 DAYS	Dr. Shuey 6/4/01 1500
6/5/01		Tylenol 325mg tid x 7 days (online) start 6/5/01	

PHYSICIAN'S ORDERS

Feldene-Tetanus-Ten-
Drug Allergies: Motrin

Self Medication Program ☐ Yes ☐ No

Smith, Kim

CT 2102

10-18-56

SCU Coal

DB
RHL
102

DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

Date/ Military Time	Prob #	
6/8/01	①	INTERFERON 3 MILLION UNITS
0820	②	SO @ TUES - TH - SAT ①
		RIBAVIRIN 600 mg PO BID ①②
		A ZIDOVUDINE TO CURES ①②
		MS LINE IN MONTH
		STOP
		CDC @ 12:00 PM
		TRT @ 3 MONTHS
		HEP - VITAL COAD 6/10/01 per MD.
		2500 CAL ADA DIET x 30 Days
		Shawn McGoughlin, M.D.
		6/8/01
		2300
6/10/01	⑤	2500 CAL DIABETIC DIET
0820		x 30 Days
		Shawn McGoughlin, M.D.
		6/10/01
		1520

PHYSICIAN'S ORDERS

Smith, Ken

CT 2162

10-18-56

SCC Clinic

DB

Feldene-Tetanus-Ten

Drug Allergies:

MOTRIN

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
6/1/01	F	<p>Buspar 10 mg PO BID</p> <p>Vitamin D 25 mg PO QHS</p> <p>RTC 4 hrs 7-9-01</p> <p>x 30 days</p> <p>Phu</p>
7/6/01	(9)	<p>INTERFERON 3 MILLION UITS SQ</p> <p>3X / wk TUES-THURS-SAT (1)</p> <p>RIBAVIRIN 600 mg PO BID (2)</p> <p>CBC & MONTH</p> <p>HEP 25 & 3, VIRAL LOAD HEP C & 3 MONTH</p> <p>REFLEX 250 mg PO QID x 7 DAYS</p> <p>MTX 15 mg PO</p> <p>DEBON REFERRAL</p> <p>TRT'S & 3 MONTHS</p> <p>MO LVE IN 1 MONTH - 8/3</p> <p>Phu</p> <p>Buspar 10 mg PO BID</p> <p>7/6/01</p> <p>0900</p>

Dr. Babar Choudhry

23006/11/01

Shamir McLaughlin, M.D.

2330 7/6/01

CT 2162

10-18-56

Cond Rupp

PCN : Matrix

Drug Allergies:

Feldene, Tetanus

Self-Medication Program ☐ Yes ☐ No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
7/9/01	F	<p>Risper 10 mg po BID x 30 days</p> <p>Vistair 50 mg po QHS</p> <p>NTC 4 wks</p> <p><i>Dr. Babar Choudhry</i></p>
7/10/01	F	<p>GLYBURIDE 10 mg BID ①④</p> <p>GLUCOPHAGE XR 500 mg tid po QHS ④ 90 Days</p> <p>GLUCOPHAGE 850 mg QHS</p> <p>2500 CAL DIABETIC DIET x 30 Days</p> <p>ABC ① MONTH, ACUV ① MONTH</p> <p>TFT'S ③ MONTH</p> <p>HEP 25 ③ MONTHS</p> <p>HYDRA / VA / MICROALBUMIN ⑥ MONTHS</p> <p>HTO ① YEAR</p> <p>RETINAL EXAM ① YEAR</p> <p>POBURY ③ MONTHS</p> <p>INTERFERON A 3 million units SQ 3x/wk</p> <p>TR / TH SAT x 30 Days ①</p> <p>RITAVIRIN 600 mg BID ④ x 30 Days</p> <p>HEP C VIRAL LOAD ③ MONTHS</p> <p><i>Dr. Babar Choudhry</i></p>

PHYSICIAN'S ORDERS

Smith Kim

CT 2162

12/18/56

SCI C.T.

Drug Allergies:

Self-Medication Program ☐ Yes ☐ No

Date/
Military
Time

Prob
#

DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

7/3/01 28 Surgery Cns. H2
8/3/01 29 L... 1% b... 14 days (S4)
M...: b... Problem (8/2) ✓

Shawn McLaughlin, M.D.

8/11/01

DMiller

DON MILLER PA-C

7/31/01
10/10

8/6/01 F Buspar 10-p Po QHS
1505 Increase Buspar 15-p Po QHS
7/12/01 Histriol 75-p Po QHS
ATC 5 wks

x 37 days

Dr. Bahar Choudhry

8/7/01
0130

8/8/01 (9) INTERFERON 3 million units 5x QM-W-F
8/8/01 x 20 days online
RIPAVIRIN 600 mg Po BID x 30 days online
CBC & LFTs

OFFER 25 & 3 MONTHS; TFF - 02 MONTHS
HEP C VITAL CDD END OF 9/01 on lab b...
ON LINE 1 MONTH

1.1.9/5

9/27/01

Shawn, M.D.

PHYSICIAN'S ORDERS

DB

PCN Moten, Felder

Drug Allergies:

Tetanus

Self-Medication Program ☐ Yes ☐ No

Smith, Kern

CT 2162

10-18-56

Cord Rep

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
8/5/01 0720	(I)	2500 DIABETIC DIET x 30 Days <div> <div> <p>Shawn McGlaughlin, M.D.</p> </div> <div> <p>8/9/01 0500</p> </div> </div>
8/12/01 0715	1	FREE STOVE x 6 MONTHS <div> <div> <p>Shawn McGlaughlin, M.D.</p> </div> <div> <p>8-12-01 1845</p> </div> </div>
8/21/01 1115	22	1. Lotrimin cream - apply to feet BID x 30 days - SM 30 2. Anistocort 0.1% cream - apply to feet BID x 30 days - SM <div> <div> <p>Shawn McGlaughlin, M.D.</p> </div> <div> <p>8/21/01 0730</p> </div> </div>
8/21/01 0130		Schedule for skin lesion evaluation - next week. Please. P.C. Smith <div> <div> <p>9-4-01</p> </div> <div> <p>1430</p> </div> </div>

No. 92000278

JAN 07 1998

CONSULTATION RECORD

Part A: To be completed by referring institution:		Type of Consult: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input checked="" type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	
Referred to: <i>Orthopaedics</i>	Referred by: (physician name) DR. MIGUEL SALOMON M.D.	Appt. Date: 2/9/98 Appt. Time:	
Specialty:			
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify) <i>Penicillins, tetracyclines, sulfonamides</i>			
Copies of lab and X-ray results attached? Yes No If yes, specify:			
Reason for Referral:			
History of Injury/Problem:		Date of Onset: 4/4/94 who has pain & edema	
<p>(L) knee. patient received steroids previously.</p> <p>note with length of medical of (L) knee</p>			
Treatment to Date/Current Medications and Significant Medication History:		<p>I will appreciate your attention</p> <p>Thank you DR. MIGUEL SALOMON M.D.</p> <p><i>[Signature]</i> 1/2/98</p> <p>Signature of Referring Physician Date</p>	
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval		Medical Director Signature: <i>[Signature]</i> Date: 1/2/98	
Transmittal Date: 1/7/98		Transmitted By: <i>[Signature]</i>	
Approval Date:		Approved By: DR. RONALD LONG M.D.	
Part B: To be completed by consulting Physician and returned with officer to the institution:			
Diagnosis and Recommendations:			
<p><i>[Signature]</i></p> <p>2-11-98</p> <p>DR. RONALD LONG M.D.</p>			

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name: *[Signature]*

Inmate Number: CT 316.2

DOB: 10-18-56

February 25, 1998 8:42 AM

HUNTINGDON BONE & JOINT SURGERY
From HUNTINGDON BONE & JOINT SURGERY

Fax #: (814) 643-5096

Page 1 of

HUNTINGDON BONE & JOINT SURGERY, INC.
3228 COLD SPRINGS ROAD
HUNTINGDON, PA 16652

SCIS CLINIC

INMATE NAME Kim Smith

INMATE NO: CT 2162

DATE: February 9, 1998

Patient presents with a history of knee problems, having had a knee injury 22 years ago while playing football. He had a medial meniscectomy based on the appearance of his current scar. He has been having problems with intermittent swelling and pain particularly on the medial side.

On exam, he has very reasonable alignment of the leg. He has normal hip, knee, and ankle motion. He has a well healed medial knee scar that is not specifically tender. There is no effusion today. He has full motion and normal stability.

IMPRESSION: Patient probably does have a mild post traumatic arthritis of the left medial compartment

RECOMMENDATIONS: At the present time, I do not see any need to obtain x-rays, give any specific medication, or do an injection into the knee. I will see him back on re-referral if he should have an increase in his symptoms. For now, he should avoid pivoting, twisting, and jumping activities. It is very important that he work on muscle strengthening, which he has been doing, and he may walk, jog, or run on level surface.

FLJ:jst

Frederick L. Jones, M.D.


2-25-98
DR. RONALD LONG M.D.

P.O. Box 1164
State College, PA 16804
(814) 238-0704

SLEEP STUDY SUMMARY REPORT

Subject Name : SMITH, KIM CT2162
Birth Date : 10-18-1956
Sex : MALE
I.D. Number : 9:03 PM
Technician's Name : LAURA L MOUNTZ, RRT

Recording Date : 02-02-1998
Time : 21:43 - 05:05 (07:21)
Protocol : Sleep Apnea Standard 2 EEG

SCORING SUMMARY: (Events/Hour referenced to Total Sleep Time)

APNEAS	#	#/Hour	Longest (s)	Mean (s)	Minutes	%TST
Central	0	0.0	0	0	0.0	0.0
Mixed	0	0.0	0	0	0.0	0.0
Obstructive	13	1.9	25	16	3.3	0.8
Total Apneas	13	1.9	25	16	3.3	0.8
HYPOPNEAS	40	5.8	26	14	9.0	2.2
TOTAL (A+H)	53	7.7	26	14	12.3	3.0
DESATURATIONS	56	8.2	74	85	29.5	7.2

COMMENTS:

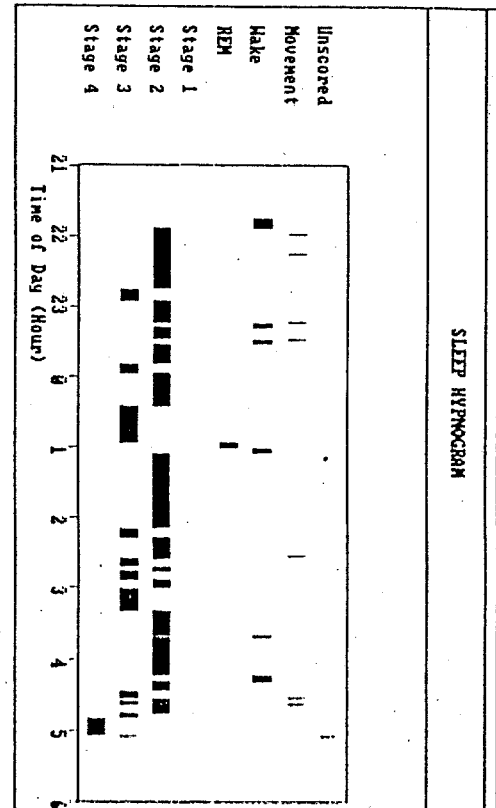
Polysomnogram. Attended and performed at J.C. Blair Memorial Hospital.

Starting SaO2: 95 Starting HR: 76

Ordering Physician: Dr. Ronald Long

SCIS
1120 Pike Street
Huntingdon, PA 16652

DR. LONG
2-19-98
DR. RONALD LONG M.D.



Recording Time (REC)	441.0	%REC	100.0
Total Sleep Time (TST)	410.5	(Sleep Efficiency Index)	93.1
Total Wake Time (TWT)	27.0		6.1
Total Movement Time	3.5		0.8
Sleep Efficiency Meas.	410.5	(percent in Stage 2-4, REM)	93.1

Sleep Summary	
Stage 1	MINS
Stage 2	0.0
Stage 3	288.0
Stage 4	102.5
REM	15.0
Slow Wave	5.0
NREM	117.5
	405.5

Wake Summary	MINS	%TST
Before Sleep Onset	8.5	31.5
Amidst Sleep	18.5	68.5
After Final Wake	0.0	0.0
		4.5

Latency Summary	MINS
Sleep Latency	8.5
REM Latency	183.5
Slow Wave Latency	52.0

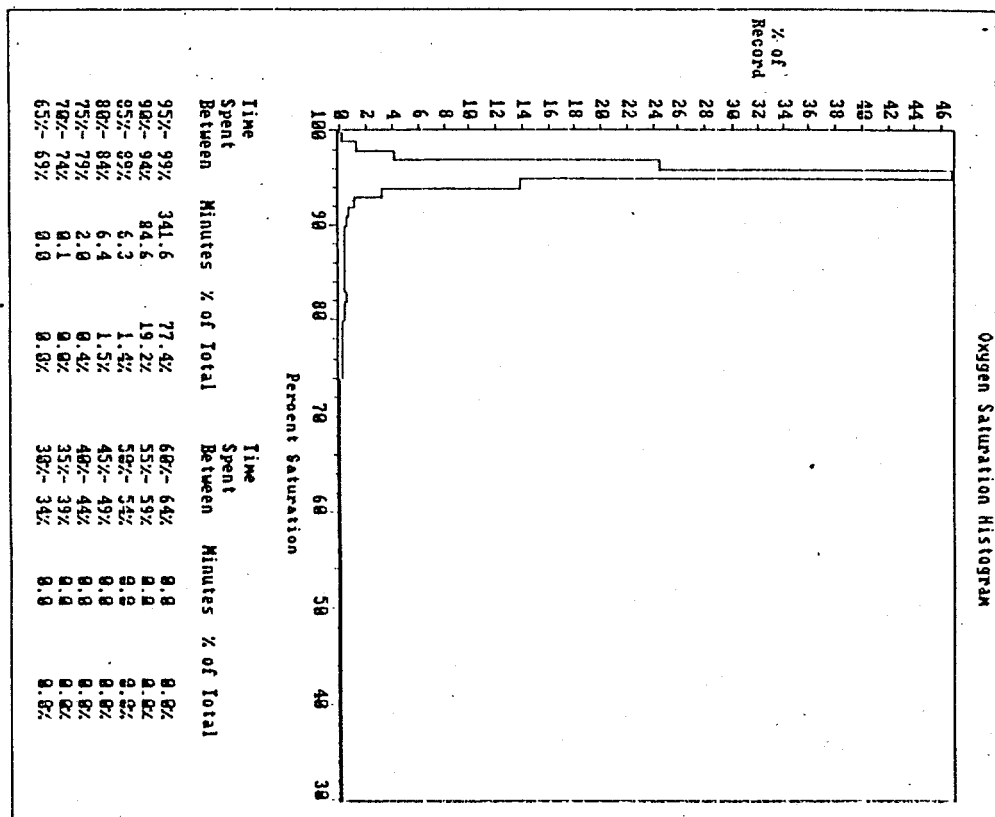
Period Summary	NUMBER
REM Periods	1
Awakenings	5
Awakenings > 2 min.	4

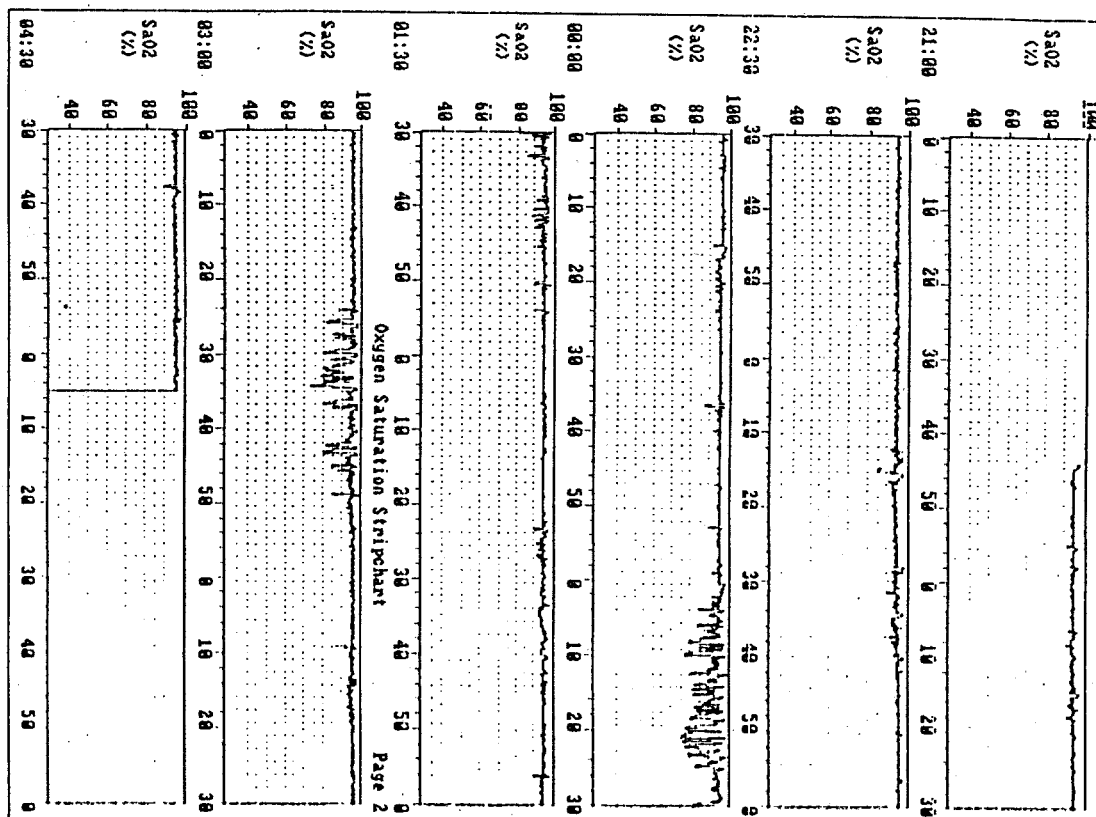
DEFINITIONS:
 Sleep Onset occurs with 1.5 minutes of Stage 1 or one Epoch of Stage 2-4, or one Epoch of REM.
 Slow Wave means Stages 3 and 4.
 REM and Slow Wave Latencies are measured from Sleep Onset.
 REM periods must be separated by 25 minutes.

TWENTY DEEPEST DESATURATIONS

Starting Time	Dur. (sec.)	SaO2 From	% To	Sleep Stage	Body Pos.	Starting Time	Dur. (sec.)	SaO2 From	% To	Sleep Stage	Body Pos.
03:33:49	41	94	74	Stg 2	Supine	03:31:37	29	91	80	Stg 2	Supine
01:20:03	51	98	76	Stg 2	Supine	03:33:22	27	95	80	Stg 2	Supine
01:20:58	42	98	77	Stg 2	Supine	03:36:08	41	95	80	Stg 2	Supine
01:09:08	52	97	78	Stg 2	Supine	03:43:00	18	83	80	Stg 2	Supine
01:19:14	45	94	78	Stg 2	Supine	01:11:50	35	95	81	Stg 2	Supine
01:21:42	43	98	78	Stg 2	Supine	01:14:08	35	98	81	Stg 2	Supine
01:22:49	38	95	79	Stg 2	Supine	01:17:38	55	97	81	Stg 2	Supine
03:32:39	25	91	79	Stg 2	Supine	01:13:29	34	94	82	Stg 2	Supine
01:07:36	41	96	80	Stg 2	Supine	01:14:45	38	96	82	Stg 2	Supine
03:29:08	51	96	80	Stg 2	Supine	01:16:31	33	96	82	Stg 2	Supine

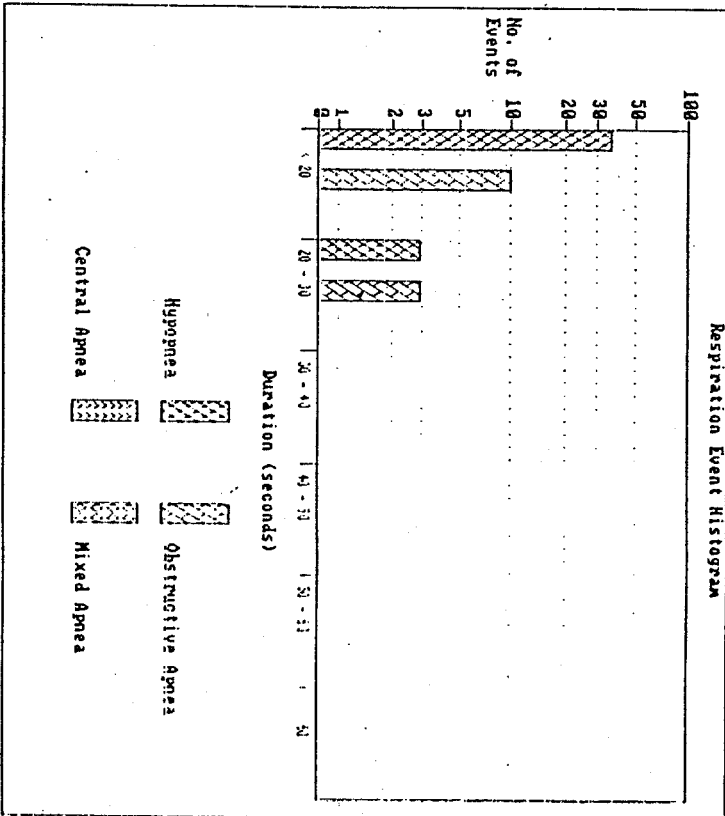
BY LOWEST SATURATION		BY SLEEP STAGE		BY BODY POSITION	
SaO2 range	No. Events	Sleep Stage	No. Events	Body Position	No. Events
100% - 94%	0	Unscored	0	Not Connected	0
94% - 89%	8	Movement	0	Supine	56
89% - 84%	20	Wake	0	Right Side	0
84% - 79%	20	REM	0	Left Side	0
79% - 74%	7	Stage 1	0	Prone	0
74% - 69%	1	Stage 2	54		
69% - 64%	0	Stage 3	2		
64% - 59%	0	Stage 4	0		
59% - 55%	0				
Below 55%	0				
Total Events	56		56		56

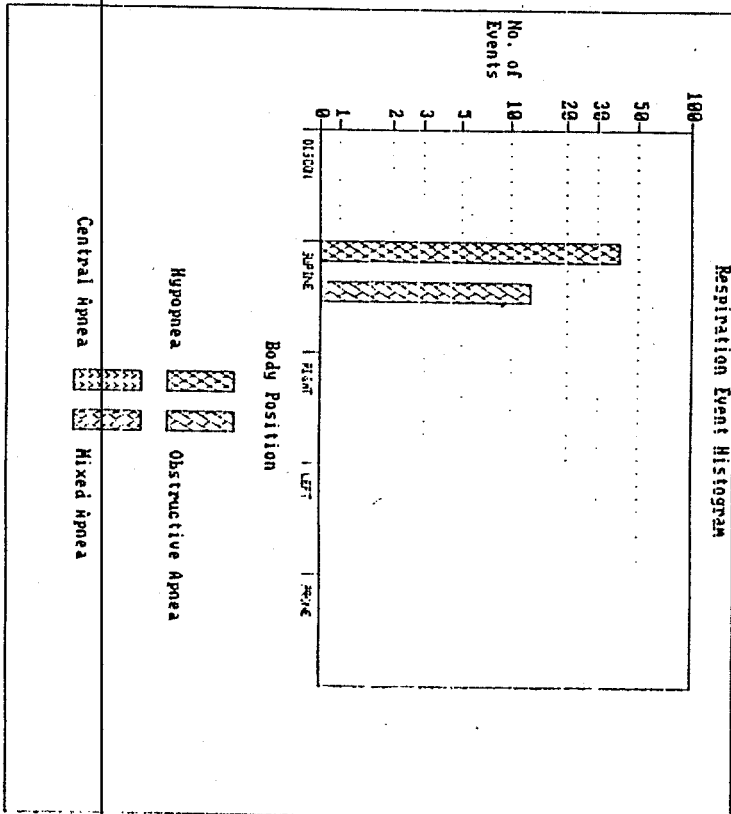
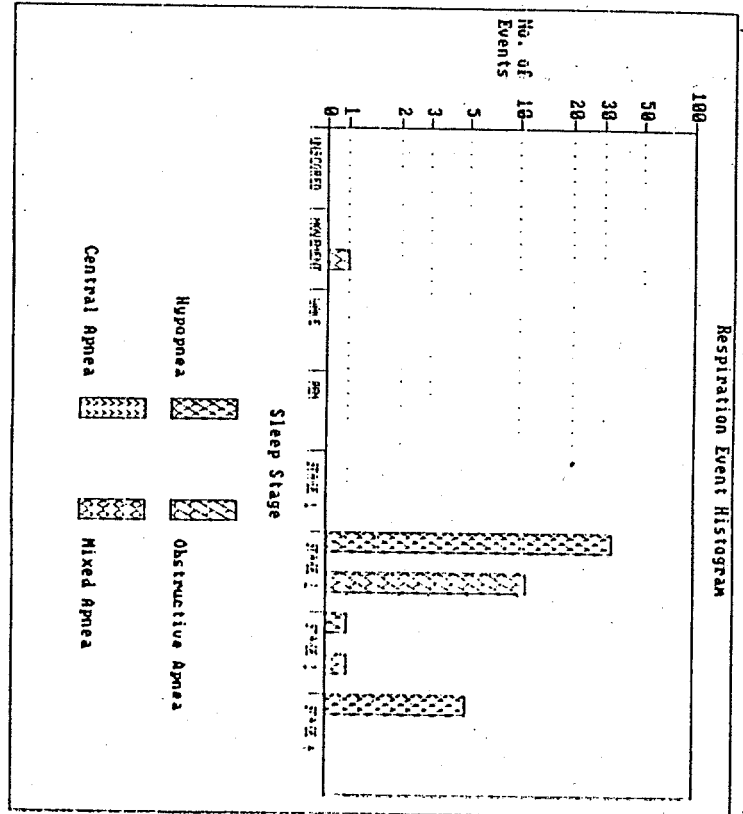


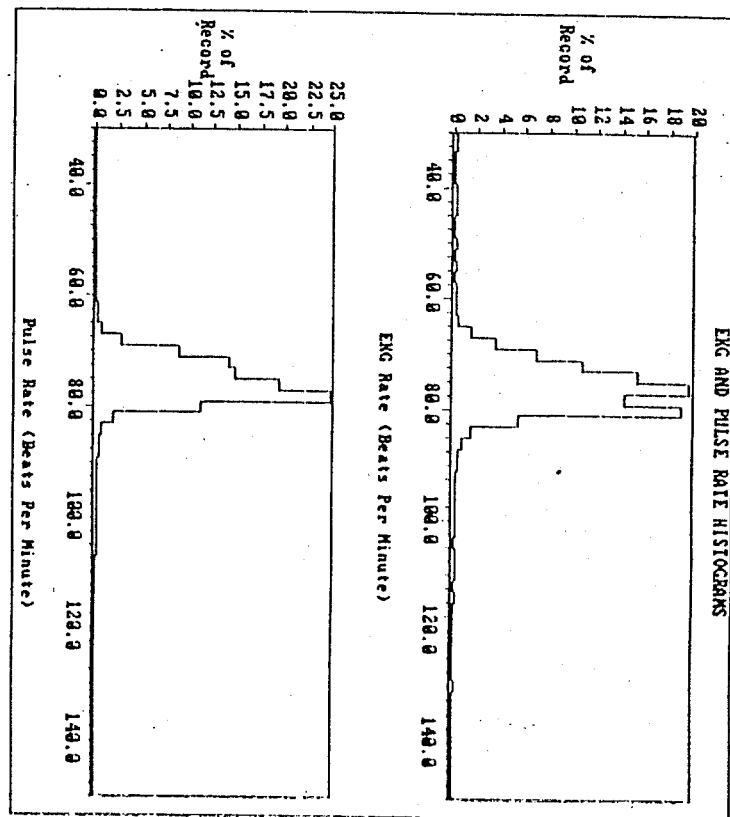


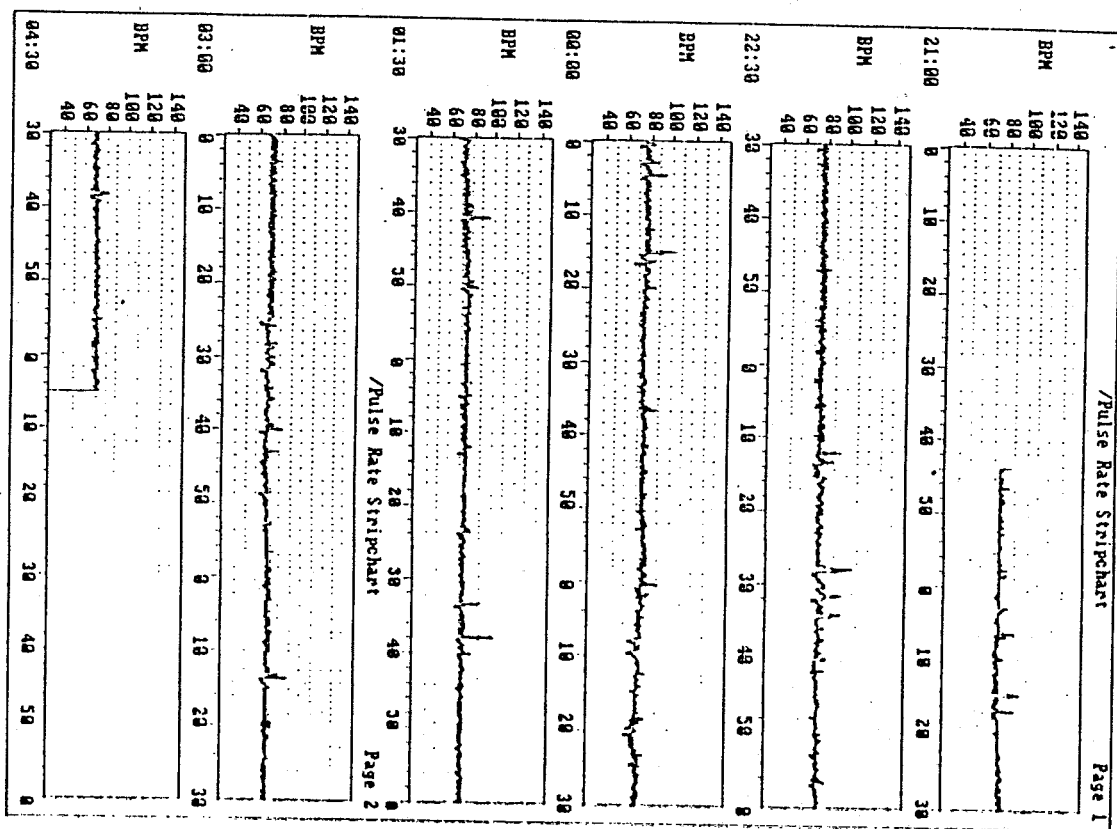
TWENTY LONGEST APNEAS/HYPOPNEAS

Start Time	Duration (seconds)	Effort Type	Airflow Type	SaO2 Max	SaO2 Min	Sleep Stage	Body Pos.
01:21:39	26	Obstr.	Hypopnea	98	78	Stg 2	Supine
01:19:11	25	Obstr.	Apnea	94	78	Stg 2	Supine
01:20:08	24	Obstr.	Apnea	92	76	Stg 2	Supine
03:36:12	24	Obstr.	Apnea	91	80	Stg 2	Supine
03:29:20	22	Obstr.	Hypopnea	92	80	Stg 2	Supine
01:29:21	21	Obstr.	Hypopnea	96	82	Stg 2	Supine
22:17:33	20	Obstr.	Hypopnea	96	-	Stg 2	Supine
03:25:16	19	Obstr.	Apnea	94	82	Stg 2	Supine
01:42:59	19	Obstr.	Hypopnea	96	-	Stg 2	Supine
00:11:25	18	Obstr.	Hypopnea	97	-	Stg 2	Supine
03:31:34	18	Obstr.	Hypopnea	91	80	Stg 2	Supine
04:39:28	18	Obstr.	Hypopnea	96	-	Stg 2	Supine
05:03:06	17	Obstr.	Hypopnea	96	-	Stg 4	Supine
00:36:09	16	Obstr.	Apnea	97	88	Stg 3	Supine
00:13:53	16	Obstr.	Hypopnea	98	-	Stg 2	Supine
03:33:51	15	Obstr.	Hypopnea	85	74	Stg 2	Supine
23:41:46	14	Obstr.	Hypopnea	96	-	Stg 2	Supine
00:04:40	14	Obstr.	Hypopnea	96	-	Stg 2	Supine
05:00:28	14	Obstr.	Hypopnea	97	-	Stg 4	Supine
01:09:12	13	Obstr.	Apnea	96	78	Stg 2	Supine









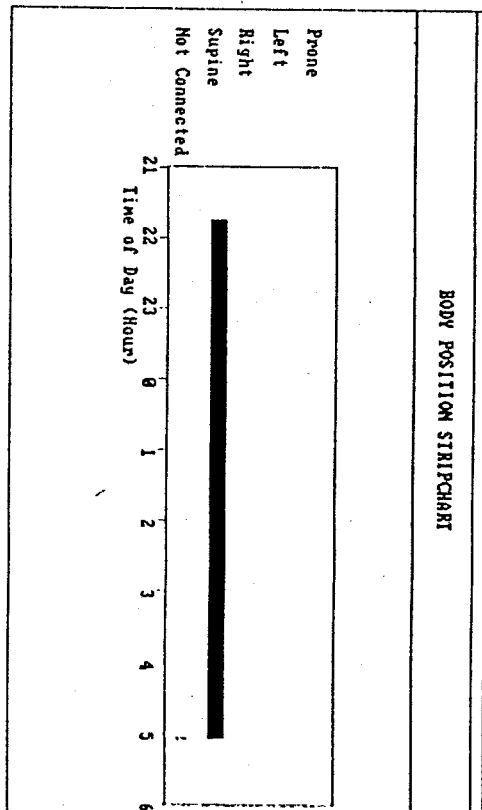
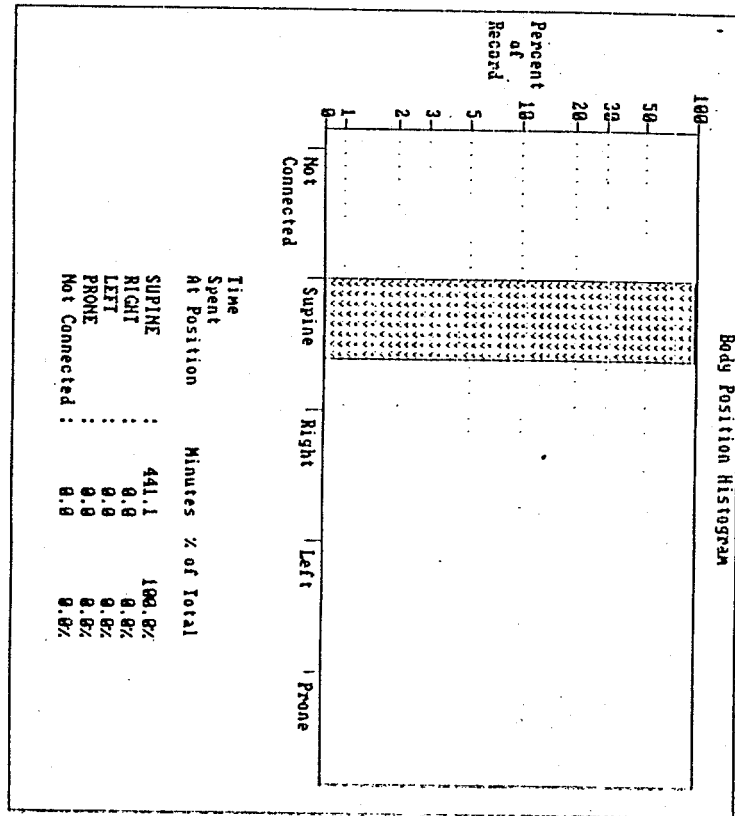
CONSULTATION RECORD

FEB 23 1998 9200359

Part A: To be completed by referring institution:		Type of Consult: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input type="checkbox"/> On-Site <input checked="" type="checkbox"/>
Referred to: <i>Dr Zupko</i> <i>Pulmonologist</i>	Referred by: (physician name) DR. RONALD LONG M.D.	Appt. Date: <i>3/2/98</i> Appt. Time: <i>9:00 AM</i>
Specialty:		
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify) <i>Motrin, PCN, feldene, Tetanus</i>		
Copies of lab and X-ray results attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify: <i>Sleep Study</i>		
Reason for Referral: <i>Re: 13 total apneas and 54 desaturations in sleep study.</i>		
History of Injury/Problem: <i>Hx of headache & excessive fatigue</i>		Date of Onset:
Treatment to Date/Current Medications and Significant Medication History:		
		Signature of Referring Physician _____ Date <i>2/2/98</i>
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval	Medical Director Signature: _____	Date: <i>2/2/98</i>
Transmittal Date: <i>2/2/98</i>	Transmitted By: <i>R. Long</i>	
Approval Date: <i>2/2/98</i>	Approved By: <i>R. Long</i>	
Part B: To be completed by consulting Physician and returned with officer to the institution		
Diagnosis and Recommendation: <i>It should have a therapeutic trial of sleep study to determine the apnea of REM sleep because he is a regular sleeper.</i> <i>Letter is follow.</i>		

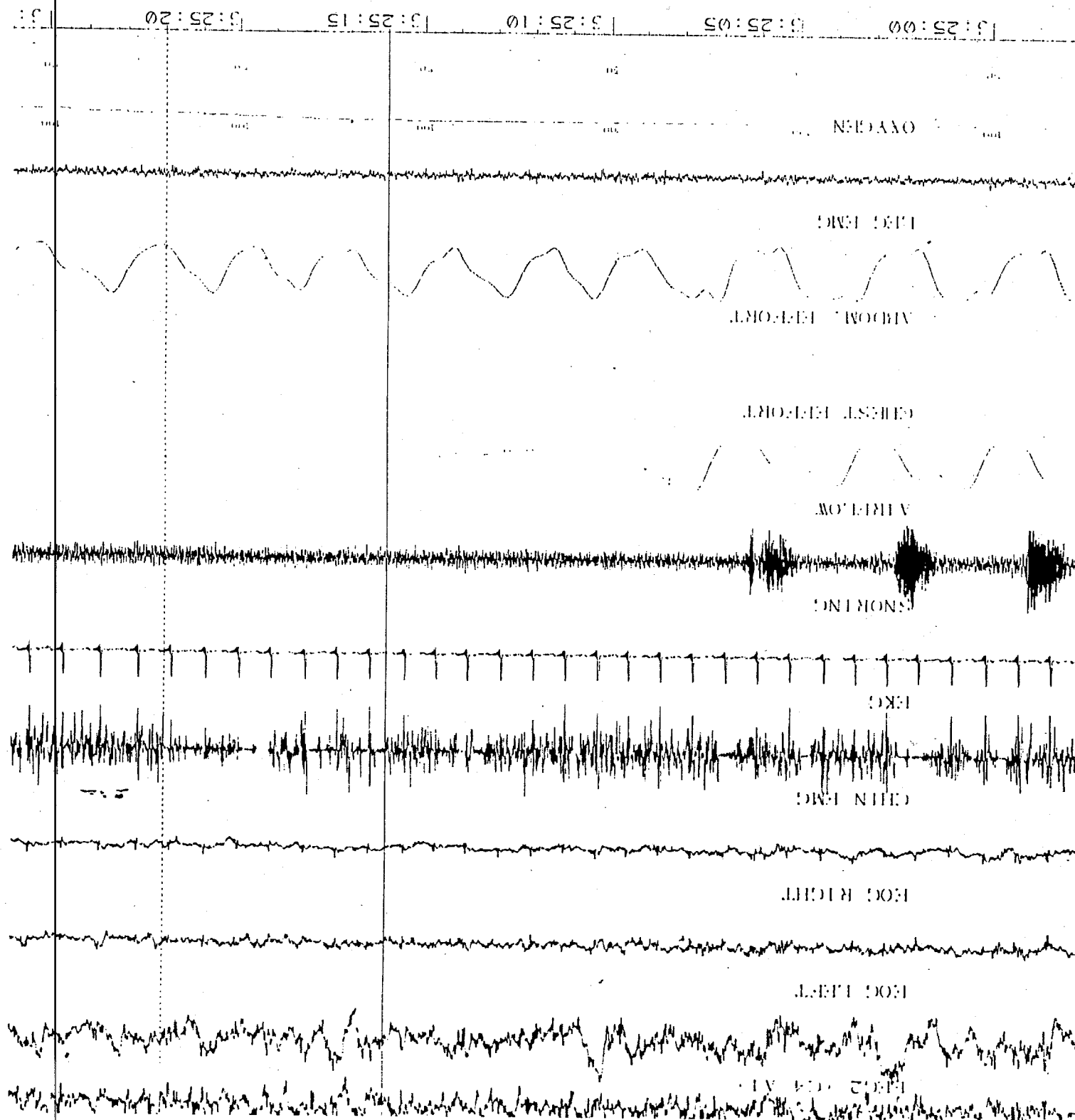
Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

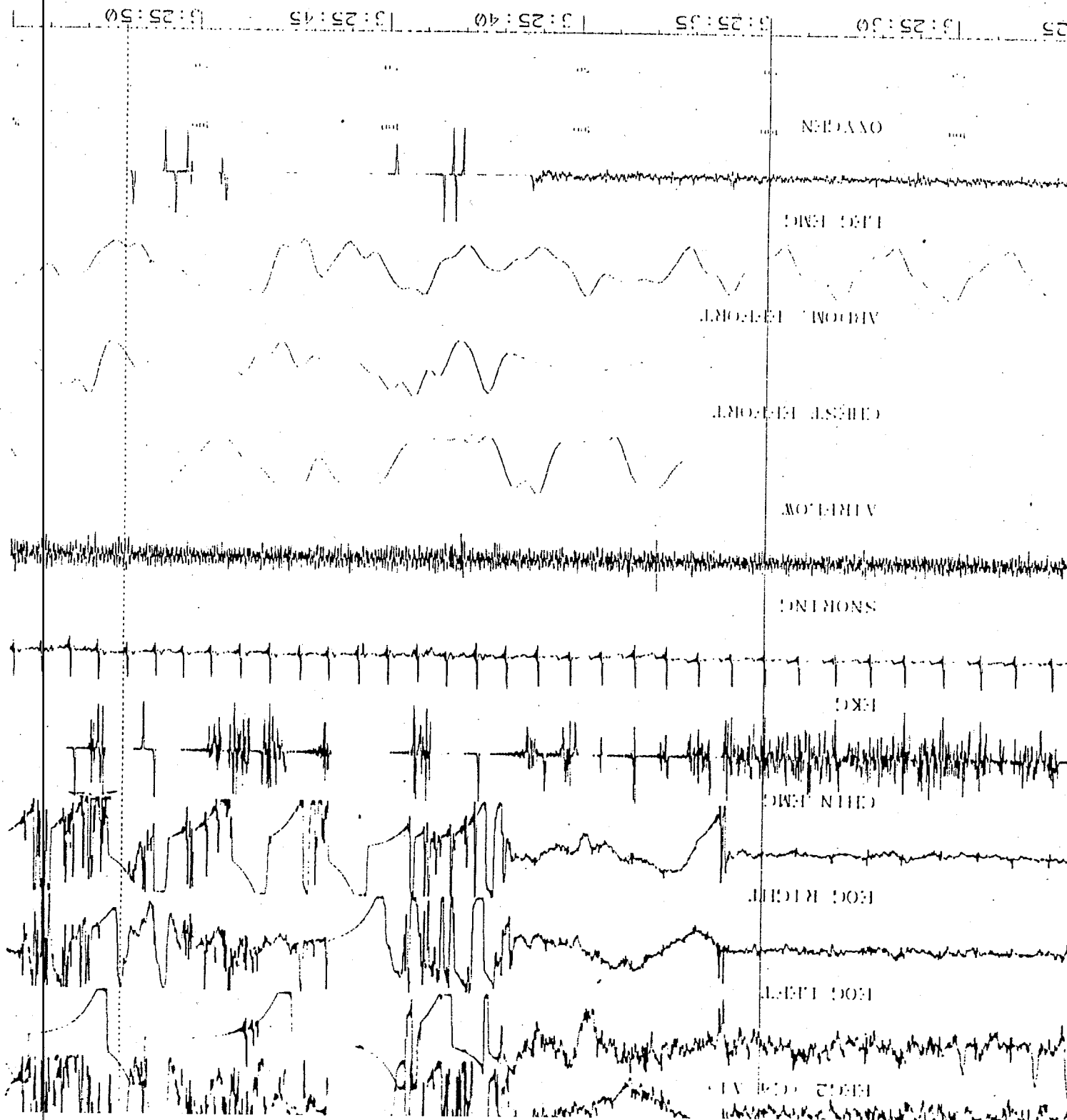
Inmate Name: *Small, Kim*
DR. RONALD LONG M.D.
Inmate Number: *C12112*
DOB: *10-18-54*
Institution: *State Prison*

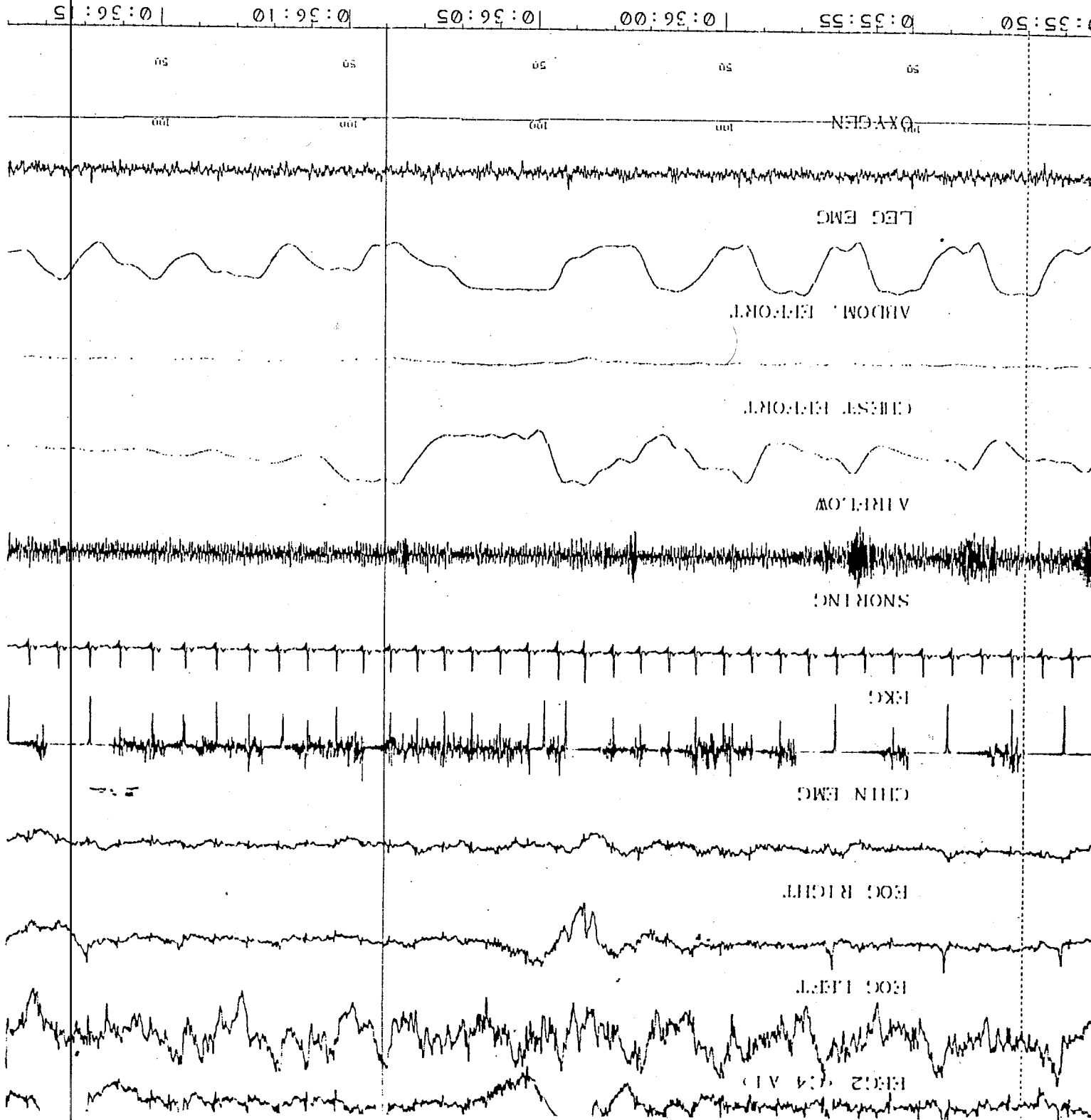


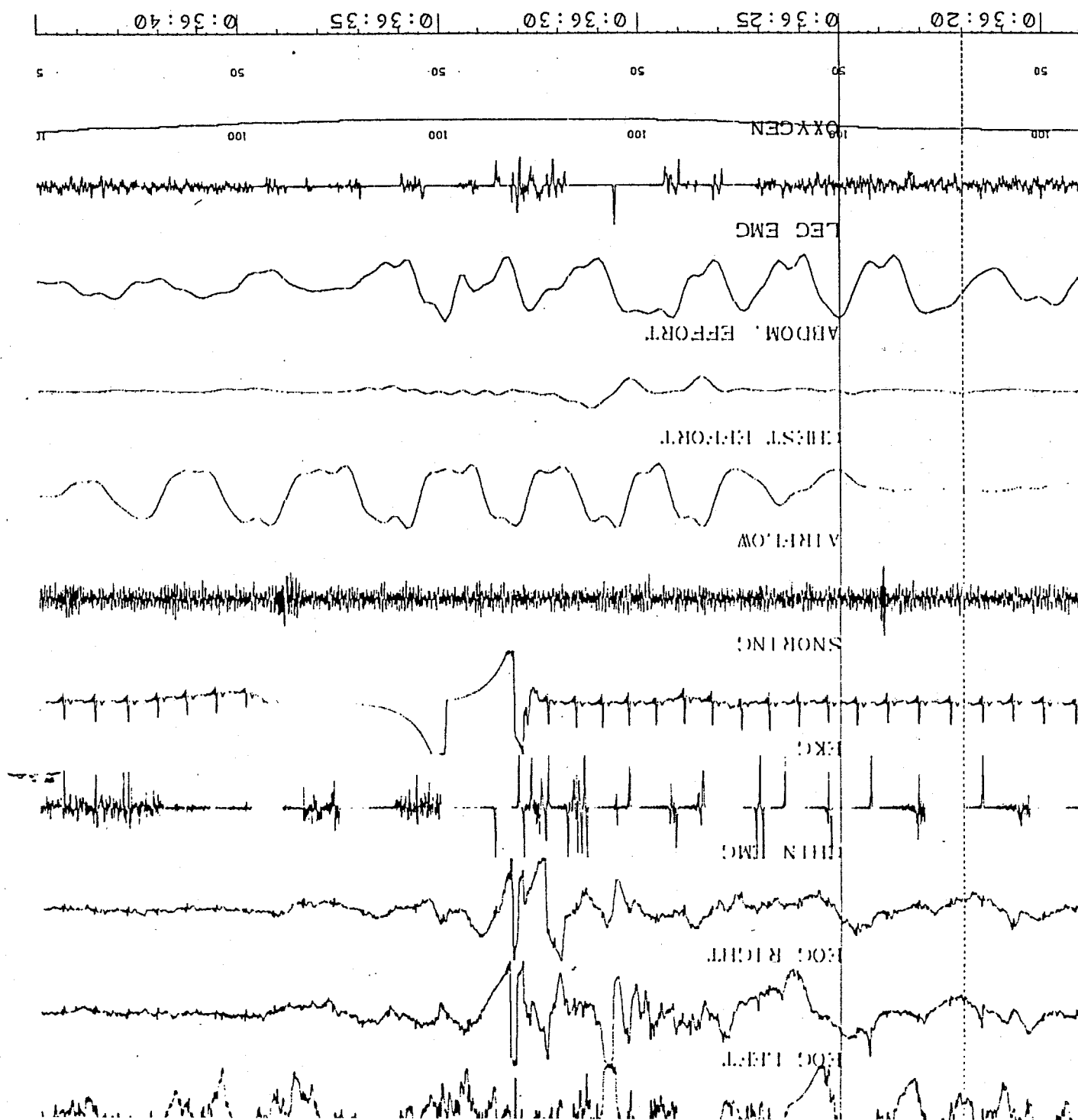
Start Time	Dur. (sec.)	Effort Type	Airflow Type	SaO2 Max	% Min	Sleep Stage	Body Pos.	Start Time	Dur. (sec.)	Effort Type	Airflow Type	SaO2 Max	% Min	Sleep Stage	Body Pos.
21:57:32	10	Obstr.	Apnea	95	-	Movmt	Supine	04:55:50	11	Obstr.	Hypopnea	96	-	Stg 4	Supine
22:12:48	13	Obstr.	Hypopnea	98	-	Stg 2	Supine	05:00:28	14	Obstr.	Hypopnea	97	-	Stg 4	Supine
22:13:02	10	Obstr.	Hypopnea	98	-	Stg 2	Supine	05:03:06	17	Obstr.	Hypopnea	96	-	Stg 4	Supine
22:14:59	13	Obstr.	Hypopnea	97	-	Stg 2	Supine								
22:17:12	10	Obstr.	Hypopnea	96	-	Stg 2	Supine								
22:17:33	20	Obstr.	Hypopnea	96	-	Stg 2	Supine								
23:37:41	10	Obstr.	Hypopnea	96	-	Stg 2	Supine								
23:41:46	14	Obstr.	Hypopnea	96	-	Stg 2	Supine								
23:56:43	10	Obstr.	Hypopnea	96	-	Stg 3	Supine								
00:03:02	12	Obstr.	Hypopnea	97	-	Stg 2	Supine								
00:04:40	14	Obstr.	Hypopnea	96	-	Stg 2	Supine								
00:11:25	18	Obstr.	Hypopnea	97	-	Stg 2	Supine								
00:13:53	16	Obstr.	Hypopnea	98	-	Stg 2	Supine								
00:14:11	12	Obstr.	Hypopnea	95	-	Stg 2	Supine								
00:20:10	11	Obstr.	Hypopnea	97	-	Stg 3	Supine								
00:36:09	16	Obstr.	Apnea	94	85	Stg 2	Supine								
01:05:27	12	Obstr.	Hypopnea	86	80	Stg 2	Supine								
01:07:47	11	Obstr.	Apnea	86	78	Stg 2	Supine								
01:09:12	13	Obstr.	Apnea	96	80	Stg 2	Supine								
01:09:26	10	Obstr.	Hypopnea	86	78	Stg 2	Supine								
01:10:56	12	Obstr.	Hypopnea	95	90	Stg 2	Supine								
01:14:50	10	Obstr.	Apnea	92	82	Stg 2	Supine								
01:16:34	11	Obstr.	Hypopnea	93	82	Stg 2	Supine								
01:19:11	25	Obstr.	Apnea	94	78	Stg 2	Supine								
01:20:08	24	Obstr.	Apnea	92	76	Stg 2	Supine								
01:20:53	11	Obstr.	Apnea	98	77	Stg 2	Supine								
01:21:04	12	Obstr.	Hypopnea	94	77	Stg 2	Supine								
01:21:39	26	Obstr.	Hypopnea	98	78	Stg 2	Supine								
01:22:51	11	Obstr.	Hypopnea	91	79	Stg 2	Supine								
01:24:23	12	Obstr.	Apnea	89	83	Stg 2	Supine								
01:29:00	10	Obstr.	Hypopnea	96	82	Stg 2	Supine								
01:29:21	21	Obstr.	Hypopnea	96	82	Stg 2	Supine								
01:40:03	11	Obstr.	Apnea	98	90	Stg 2	Supine								
01:41:02	13	Obstr.	Apnea	96	89	Stg 2	Supine								
01:42:59	19	Obstr.	Hypopnea	96	-	Stg 2	Supine								
02:23:39	10	Obstr.	Hypopnea	97	90	Stg 2	Supine								
02:55:51	19	Obstr.	Hypopnea	92	82	Stg 2	Supine								
03:25:16	22	Obstr.	Apnea	92	80	Stg 2	Supine								
03:29:20	11	Obstr.	Hypopnea	90	84	Stg 2	Supine								
03:30:30	18	Obstr.	Hypopnea	91	80	Stg 2	Supine								
03:31:34	13	Obstr.	Hypopnea	93	80	Stg 2	Supine								
03:33:22	15	Obstr.	Hypopnea	85	74	Stg 2	Supine								
03:36:12	24	Obstr.	Apnea	91	80	Stg 2	Supine								
03:42:28	11	Obstr.	Hypopnea	97	80	Stg 2	Supine								
03:47:35	11	Obstr.	Hypopnea	97	87	Stg 2	Supine								
04:08:49	13	Obstr.	Hypopnea	97	88	Stg 2	Supine								
04:39:28	18	Obstr.	Hypopnea	96	-	Stg 4	Supine								
04:50:52	10	Obstr.	Hypopnea	96	-	Stg 4	Supine								
04:53:07	10	Obstr.	Hypopnea	97	-	Stg 4	Supine								

Start Time	Dur. (sec.)	SaO2 % From To	Sleep Stage	Body Pos.	Start Time	Dur. (sec.)	SaO2 % From To	Sleep Stage	Body Pos.
00:36:21	25	97 88	Stg 3	Supine	03:43:00	18	83 80	Stg 2	Supine
01:05:48	20	94 85	Stg 2	Supine	03:44:36	23	96 86	Stg 2	Supine
01:06:37	17	94 88	Stg 2	Supine	03:45:04	34	97 89	Stg 2	Supine
01:07:15	19	96 87	Stg 2	Supine	03:48:23	30	97 87	Stg 2	Supine
01:07:36	41	96 80	Stg 2	Supine	04:08:57	20	97 88	Stg 2	Supine
01:08:20	21	98 85	Stg 2	Supine	04:37:23	22	96 90	Stg 3	Supine
01:08:45	21	97 86	Stg 2	Supine					
01:09:08	52	97 78	Stg 2	Supine					
01:11:19	29	95 90	Stg 2	Supine					
01:11:50	35	95 81	Stg 2	Supine					
01:12:27	45	99 90	Stg 2	Supine					
01:13:29	34	94 82	Stg 2	Supine					
01:14:08	35	98 81	Stg 2	Supine					
01:14:45	38	96 82	Stg 2	Supine					
01:15:57	28	93 84	Stg 2	Supine					
01:16:31	33	96 82	Stg 2	Supine					
01:17:05	27	97 83	Stg 2	Supine					
01:17:38	55	97 81	Stg 2	Supine					
01:17:38	45	94 78	Stg 2	Supine					
01:20:03	51	98 76	Stg 2	Supine					
01:20:58	42	98 77	Stg 2	Supine					
01:21:42	43	98 78	Stg 2	Supine					
01:22:49	38	95 79	Stg 2	Supine					
01:24:13	43	94 83	Stg 2	Supine					
01:29:26	44	96 82	Stg 2	Supine					
01:30:13	23	98 89	Stg 2	Supine					
01:32:56	24	95 87	Stg 2	Supine					
01:40:13	16	98 90	Stg 2	Supine					
01:40:57	30	97 89	Stg 2	Supine					
01:41:36	29	97 90	Stg 2	Supine					
01:49:30	64	96 90	Stg 2	Supine					
01:53:51	17	95 90	Stg 2	Supine					
02:55:58	15	97 90	Stg 2	Supine					
03:23:50	23	96 89	Stg 2	Supine					
03:25:15	43	95 82	Stg 2	Supine					
03:27:07	24	95 85	Stg 2	Supine					
03:27:32	28	97 87	Stg 2	Supine					
03:29:08	51	96 80	Stg 2	Supine					
03:30:05	49	98 84	Stg 2	Supine					
03:30:55	40	96 86	Stg 2	Supine					
03:31:37	29	91 80	Stg 2	Supine					
03:32:08	13	89 82	Stg 2	Supine					
03:32:22	15	91 85	Stg 2	Supine					
03:33:05	25	91 79	Stg 2	Supine					
03:33:22	15	95 85	Stg 2	Supine					
03:33:49	27	95 80	Stg 2	Supine					
03:36:08	41	94 74	Stg 2	Supine					
03:36:52	27	98 86	Stg 2	Supine					
03:42:29	31	98 82	Stg 2	Supine					











ALTOONA LUNG SPECIALISTS

George M. Zlupko, M.D.

Craig W. Hartman, M.D.

801 Howard Avenue
Altoona, PA 16601
Telephone: (814) 946-2846
Fax: (814) 946-1273

March 28, 1998

CT 2162
Ronald Long, M.D.
SCI Smithfield
1120 Pike Street
Huntingdon, PA 16652

RE: KIM SMITH

Dear Dr. Long:

Your patient, Kim Smith, was seen in our office March 26, 1998. The following is a report of my consultation:

Mr. Smith is a 41-year-old black male who is a resident of the Correctional Institution in Smithfield. He has about four more years to serve for his minimum. He is referred because of sleep apnea.

HISTORY OF PRESENT ILLNESS: According to Mr. Smith, he has had symptoms associated with sleep apnea since about 1992. He relates this to some episode of beating that he received at the hands of some gang members, but I really do not really know of any connection between that and a sleep apnea syndrome. He has had two sleep studies performed, one that accompanied him today from J.C. Blair. It showed him to have about 13 apneas per hour ranging in time from 16-25 seconds with significant desaturations during these times. Mr. Smith states that he does have some daytime sleepiness. It is not severe. He also has some history consistent with postnasal drip.

PAST MEDICAL HISTORY: Past medical history on this patient includes an orbital blow out secondary to his beating at the hands of the gang members. He had a lymphoma removed from his ribs in the past. He had a hernia. He also has problems with his lumbar discs. He is allergic to Penicillin and NSAID's.

FAMILY HISTORY: The patient's father and mother had coronary artery disease and hypertension. A sister and some aunts had diabetes. No asthma runs in the family.

Ronald Long, M.D.
RE: Kim Smith
March 28, 1998
Page 2

SOCIAL HISTORY: The patient states that he was exposed to asbestos for about 11 years. He has been a smoker for about 20 years smoking at the rate of ½ pack of cigarettes per day. Currently, he does not drink any alcohol.

PHYSICAL EXAMINATION: This is a short, stocky black male who appears in no acute distress.

HEAD: Normocephalic. No tenderness.

EYES: Pupils are equal and reactive to light and accommodation. The extraocular muscles move within normal limits. Sclerae are nonicteric. Conjunctivae are well injected.

NECK: Supple. There is no adenopathy. Trachea is within the midline. Thyroid is not enlarged.

CHEST: Clear to auscultation and percussion. Heart rate is regular. No murmurs or gallops are noted. Blood pressure is 130/70.

ABDOMEN: Moderately obese. No organomegaly is present.

EXTREM: No evidence of clubbing, cyanosis or edema.

LABORATORY STUDIES:

Chest X-ray: Clear lung fields. Normal heart size.

Pulmonary Function Studies: Show a mild obstructive ventilatory impairment with mild hyperinflation and severe airtrapping and a mild diffusing capacity impairment.

Sleep Study: Sleep study is as previously prescribed showing sleep apnea.

Ronald Long, M.D.
RE: Kim Smith
March 28, 1998
Page 3

I talked to Mr. Smith and explained to him the nature of sleep apnea. I told him that this was a mechanical problem in his posterior pharynx. I recommended that he use CPAP. The sleep study that was performed is not a therapeutic one. It does not determine the optimal level of CPAP to correct his obstructive apnea.

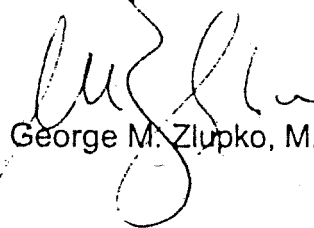
SUGGESTIONS: I would have Mr. Smith have a therapeutic CPAP study performed to determine the optimal level of CPAP required. I would then place him on the CPAP nightly.

I did discuss with Mr. Smith some potential surgical approaches to his problem, but those would required specific investigations by the surgical specialties involved, and I would not recommend them at this time.

Once CPAP has been instituted, I would follow Mr. Smith clinically checking on his day-time symptoms and his compliance with the CPAP at night.

Thank you for referring this patient to our office and allowing us to participate in his care.

Sincerely,



George M. Zupko, M.D.

GMZ/kld

Handwritten note:
RPL
4-16-98
@ 1440

DR. RONALD LONG M.D.

No. _____

CONSULTATION RECORD

APR 17 1998

Part A: To be completed by referring institution:		Type of Consult: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input type="checkbox"/> On-Site <input checked="" type="checkbox"/> Off-Site	
Referred to: CPAP	Referred by: (physician name) Dr Long		Appt. Date:
Specialty: Respiratory Therapy			Appt. Time:
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify)	Moticin, Feldene, PCN & Tefam		
Copies of lab and X-ray results attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, specify: Dr. Zepke's consult		
Reason for Referral: Sleep apnea			
History of Injury/Problem:		Date of Onset:	
Treatment to Date/Current Medications and Significant Medication History:			
DR. RONALD LONG M.D.			
Signature of Referring Physician			Date
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval	Medical Director Signature:		Date 4/16/98
Transmitted Date: 4/17/98	Transmitted By: R. Long		
Approval Date:	Approved By:		
Part B: To be completed by consulting Physician and returned with officer to the institution			
Diagnosis and Recommendations:			
Signature of Consulting Physician			Date

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name:

Kim Smith

Inmate Number:

CT 2162

DOB:

10-15-56

16189970965
Apr. 22. 1998 10:41AM WEXFORD 6189970965
To: SMITHFIELD

No. 8143 P. 1/1

WEXFORD HEALTH SOURCES

DATE: APRIL 22, 1998
TO: DR. LONG
FROM: DR. HENDERSON
CORPORATE MEDICAL DIRECTOR
UNIT: SCI-SMITHFIELD
RE: KIM SMITH
CT2162
SERVICE REQUESTED: CPAP

The request for referral on the above-named patient was referred for my review. This request is not authorized at this time for the following reason(s):

Patient has had problem for 6 years with minimal symptoms I would like to discuss this with Dr. Lewis before proceeding.

5/5/98
@ 0715
RAZ
DR. RONALD LONG M.D.

cc: file

05/07/1998 13:20 8149461273

ALTOONA LUNG

PAGE 82

ALTOONA LUNG SPECIALISTS
801 HUWARD AVENUE
ALTOONA, PA 16601
Pulmonary Function Report

COMPLETE PFT

Name: SMITH, KIM ID#: SMITH, 10/18/56
Age: 41 Years Room: Out/P Date: 26-MAR-98
Sex/Race: Male / Black Temp/Pres: 22 C / 730 mmHg
Height: 65 in 165 cm Physician: ZLUPKO
Weight: 214 lbs 97 kg Tested by: KATHY
Prev Study: YES, 1993
Diagnosis: SLEEP APNEA; FATIGUE Medication: SEE LIST
Dyspnea: Yes How Long: 1992 Resting: Yes Exer: Yes
Cough: No
Smoker: Yes How Long: 20 YRS Stopped: NO
Cigarettes: .5 PPD Cigars: NO Pipe: NO

		PRED	TRL1	TRL2	TRL3	BEST	%PRED	%CHG
SPIROMETRY (BTPS) PRE-RX								
FVC	Liters	4.38	3.05	3.35	3.21	3.35	77*	
FEV1	Liters	3.64	2.50	2.72	2.61	2.72#	75*	
FEV1/FVC	%	83	82	81	81	81	98	
FEF25-75%	L/Sec	3.94	2.65	2.80	2.78	2.80	71	
FEF75-85%	L/Sec		0.80	1.02	0.76	1.02		
FEF50%	L/Sec		3.10	3.18	2.90	3.18		
PEF	L/Sec		3.52	3.54	3.71	3.71		
FET100%	Sec		6.1	5.7	6.5	5.7		
FIF50%	L/Sec		2.65	3.25	2.70	3.25		
PIF	L/Sec		2.76	3.40	2.88	3.40		
MVV	L/Min		88	85		88		
f	1/Min		70	65		70		

		POST-RX						
SPIROMETRY (BTPS) POST-RX								
FVC	Liters	4.38	3.47	3.78	4.01	4.01	92	20
FEV1	Liters	3.64	2.89	3.27	3.40	3.40	93	25
FEV1/FVC	%	83	83	87	85	85	103	5
FEF25-75%	L/Sec	3.94	3.11	4.54	4.17	4.17	106	49
FEF75-85%	L/Sec		0.90	1.16	1.28	1.28		25
FEF50%	L/Sec		3.61	3.08	4.42	4.42		39
PEF	L/Sec		4.35	5.91	4.69	5.91		59
FET100%	Sec		5.7	5.8	5.7	5.7		0
FIF50%	L/Sec		4.21	3.15	3.59	3.59		10
PIF	L/Sec		4.37	3.64	3.78	4.37		29
MVV	L/Min		106	121		121		38
f	1/Min		60	60		60		-14

* = OUTSIDE 95% CONFIDENCE INTERVAL

* = OUTSIDE NORMAL RANGE

98

05/07/1998 13:20 8149461273

ALTOONA LUNG

PAGE 03

PAGE 2

Pulmonary Function Report

Name: SMITH, KIM

ID#: SMITH, 10/18/56

		FRED	TRL1	TRL2	TRL3	AVG	%PRED	%CHG
LUNG VOLUMES (BTPS) PRE-RX								
VC	Liters	4.38	3.48	3.23	2.88	3.48	79*	
ERV	Liters		1.10	1.16	0.85	1.04		
IC	Liters		2.38	2.07	2.03	2.16		
VE	L/Min	6.3	17.0	24.0	20.0	20.3	322*	
Vt	Liters		1.29	1.11	1.45	1.28		
f	1/Min		13	21	13	16		
LUNG VOLUMES (BTPS) POST-RX								
VC	Liters	4.38	4.01	3.35		4.01	92	15
TLC	Liters	5.92	7.35			7.41	125*	
RV	Liters	1.57	3.34			3.40#	216*	
RV/TLC	%	27	45			46#	172*	
FRC N2	Liters	2.87	4.53			4.53#	158*	
ERV	Liters		1.19	1.06		1.13		9
IC	Liters		2.16	2.29		2.22		3
VE	L/Min	6.3	20.0	22.0		21.0	333*	3
Vt	Liters		1.38	1.11		1.25		-2
f	1/Min		15	20		18		
DISTRIBUTION POST-RX								
LCI	Unitless		9.3			9.3		
Wash Time	Minutes		3.1			3.1		
DIFFUSION POST-RX								
DLCO	ml/Min/mmHg	33.4	19.0	23.1		21.0#	63*	
DLCO/VA	1/Min/mmHg	5.69	4.09	4.68		4.39	77	
Krogh's K	1/Min		3.53	4.03		3.79		
VA	Liters		4.64	4.95		4.78		
CO T.C.	Sec		17.0	14.9		15.8		
IVC	Liters		3.52	3.82		3.67		
FI CH4	%		0.300	0.300		0.300		
FE CH4	%		0.210	0.215		0.213		
FI CO	%		0.300	0.300		0.300		
FE CO	%		0.113	0.107		0.110		
BHT	Sec		10.53	10.37		10.45		

= OUTSIDE 95% CONFIDENCE INTERVAL * = OUTSIDE NORMAL RANGE

05/07/1998 13:20

8149461273

ALTOONA LUNG

PAGE 04

PAGE 3

Pulmonary Function Report

Name: SMITH, KIM

ID#: SMITH, 10/18/56

= OUTSIDE 95% CONFIDENCE INTERVAL * = OUTSIDE NORMAL RANGE
CALIBRATION: PRED: 3.32 ACTUAL: EXP 3.37 INSP 3.31
IPS-OL10-08 IPS-OH10-07 N-2103-4

SMITH

INTERPRETATION:

1. Mild reversible obstructive ventilatory impairment.
2. Mild hyperinflation with severe airtrapping.
3. Mild diffusing capacity impairment.

GMZ/kld

Handwritten signature: M. J. G.

05/07/1998 13:20

8149461273

ALTOONA LUNG

PAGE 05

ALTOONA LUNG SPECIALISTS
801 HOWARD AVENUE
ALTOONA, PA 16601
Pulmonary Function Report

COMPLETE PFT

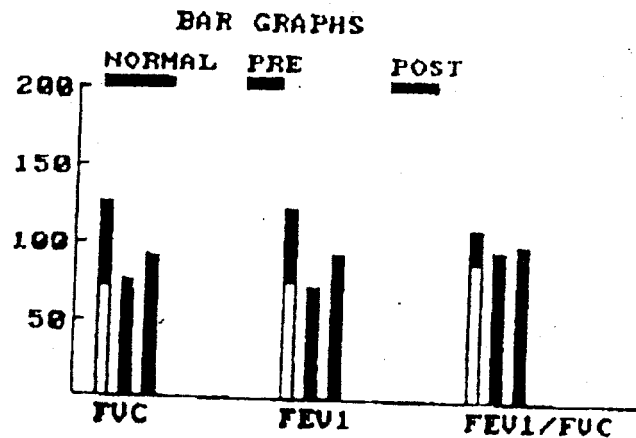
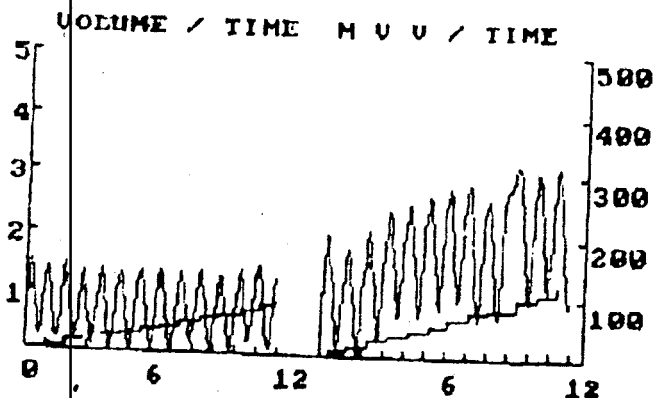
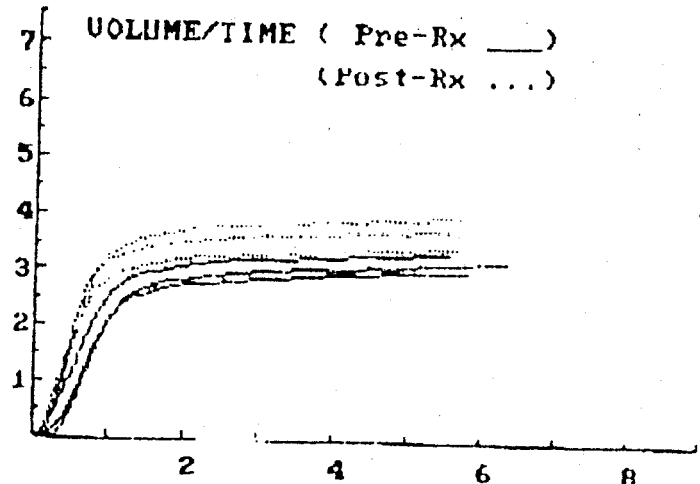
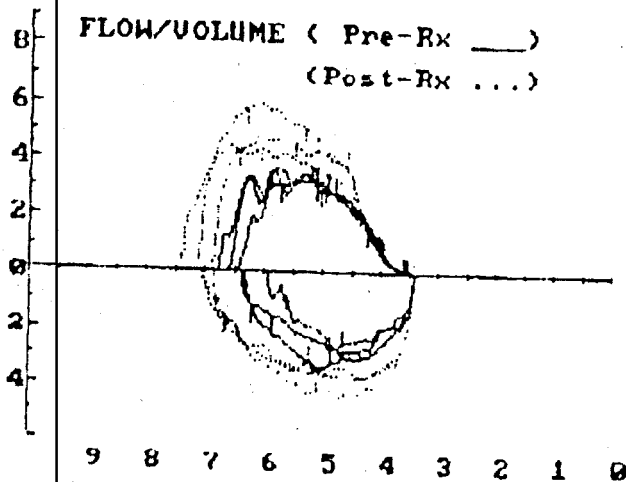
Name: SMITH, KIM

Age: 41 Years
Sex/Race: Male / Black
Height: 65 in 165 cm
Weight: 214 lbs 97 kg

ID#: SMITH, 10/18/56
Room: Out/P Date: 26-MAR-98
Temp/Pres: 22 C / 730 mmHg
Physician: ZLUPKO
Tested by: KATHY

Diagnosis: SLEEP APNEA; FATIGUE
Dyspnea: Yes How Long: 1992
Cough: NO
Smoker: Yes How Long: 20 YRS
Cigarettes: .5 PPD

Prev Study: YES, 1993
Medication: SEE LIST
Resting: Yes Exer: Yes
Stopped: NO
Cigars: NO Pipe: NO



05/07/1998 13:20

8149461273

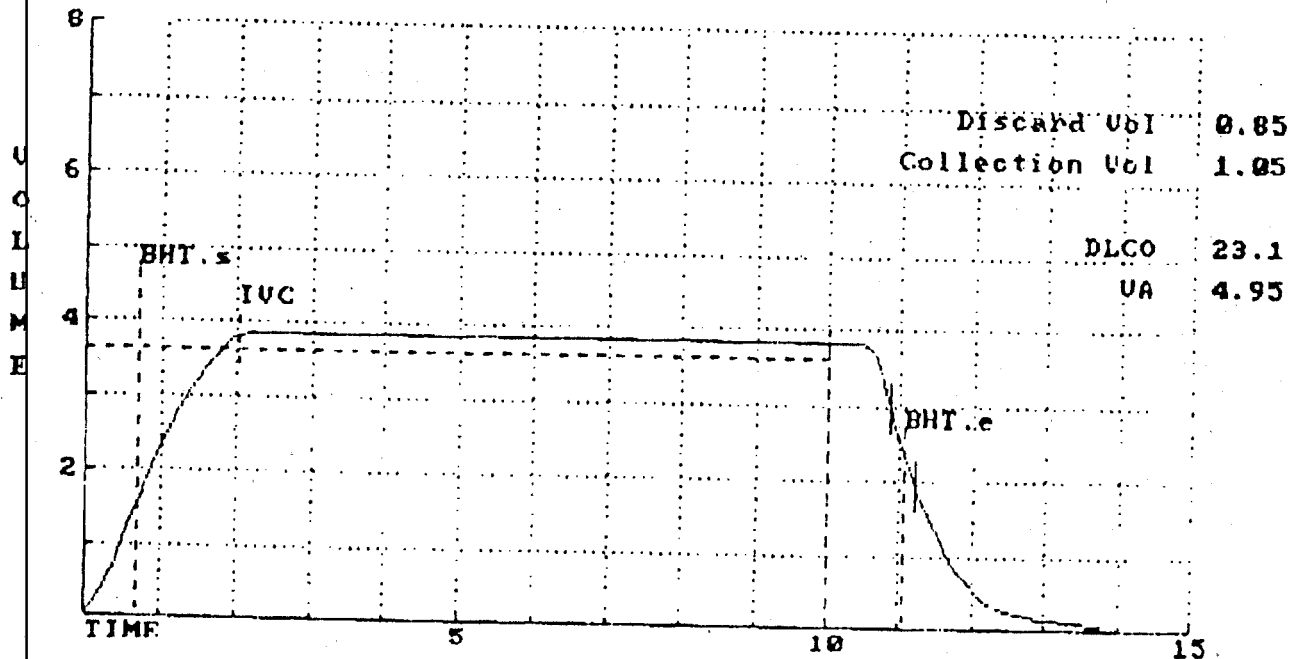
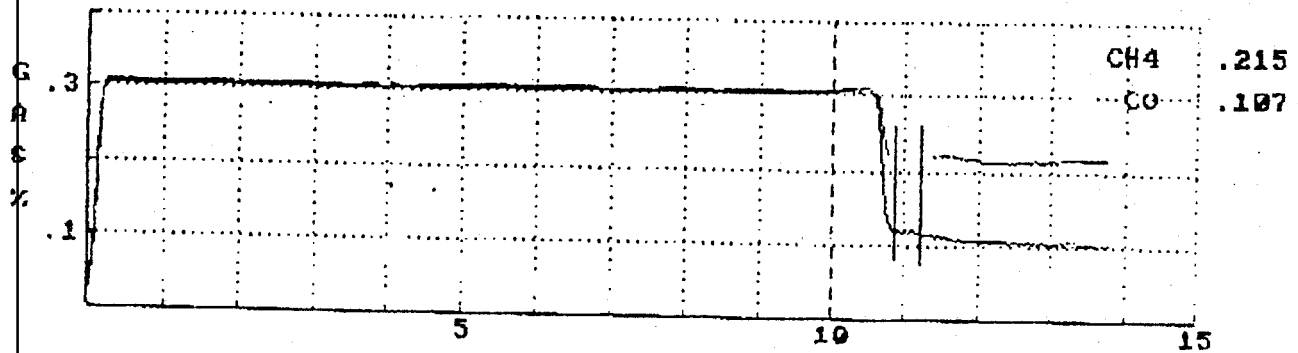
ALTOONA LUNG

PAGE 06

Name: SMITH, KIM
ID #: SMITH, 10/18/56

Date: 26-MAR-98

Post-Rx



Name: SMITH, KIM
ID #: SMITH, 10/18/56

Date: 26-MAR-98

Post-Rx	PRED	LAST 02	Tr1 1	Tr1 2	Tr1 3	BEST	%PRED
DLCO	33.4		19.0	23.1		21.0	63 *
DLCO/VA	5.69		4.09	4.68		4.39	77
Graph = K			3.53	4.03		3.79	
VA			4.64	4.95		4.78	
CO T.C.			17.0	14.9		15.8	
IVC			3.52	3.82		3.67	
FI OI4			0.300	0.300		0.300	
FE CH4			0.210	0.215		0.213	
FI CO			0.300	0.300		0.300	
FE CO			0.113	0.107		0.110	
BHT			10.53	10.37		10.45	

No. 92019133

CONSULTATION RECORD

Part A: To be completed by referring institution:		Type of Consult: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up		<input checked="" type="checkbox"/> On-Site <input type="checkbox"/> Off-Site
Referred to: <u>Dr. Hardisty-</u>		Referred by: (physician name) <u>Dr. Ronald Long</u>		Appt. Date: <u>12/9/98</u>
Specialty: <u>Surgery</u>				Appt. Time:
Drug Sensitivity: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Specify)				
Copies of lab and X-ray results attached? Yes No If yes, specify:				
Reason for Referral: <u>Pilonidal cyst</u>				
History of Injury/Problem:		Date of Onset:		
<u>42 year old African - American male & chronic</u> <u>cyst which drains & resolves continuously. Has been</u> <u>on suppressive antibiotics & success</u>				
Treatment to Date/Current Medications and Significant Medication History:				
RONALD A LONG, M.D.				
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval		Medical Director Signature: <u>Ronald A. Long</u>		Date: <u>11/19/98</u>
Transmitted Date: <u>11/20/98</u>		Transmitted By: <u>Ruth K. Long</u>		
Approval Date: <u>11/20/98</u>		Approved By: <u>Kaufman</u>		
Part B: To be completed by consulting Physician and returned with office to the institution				
Diagnosis and Recommendations: <u>Healthy R & recurrent rectal pain, bleeding</u> <u>perianal</u> <u>& Fistula in ano</u> <u>Surg. fistulotomy under gen aneth</u> <u>ref. apt.</u>				
Signature of Consulting Physician: <u>[Signature]</u>				Date: <u>12/9/98</u>

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name: Smith, TimInmate Number: 01-216-2DOB: 11-10-56

12-11-98
00700

No. 92019292
DEC 3 1999

CONSULTATION RECORD

Part A: To be completed by referring institution:		Type of Consult: <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> On-Site <input checked="" type="checkbox"/> Off-Site	
Referred to: <u>James Hardesty, MD</u>	Referred by: (physician name) <u>Ronald A. Lang, MD</u>		Appt. Date: <u>1/6/99</u>
Specialty: <u>Surgery</u>			Appt. Time: <u>Early AM</u>
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify) <u>Motrin, Feldene, PCN, Tetanus</u>			
Copies of lab and X-ray results attached? <input checked="" type="radio"/> Yes <input type="radio"/> No If yes, specify: <u>Dr Hardesty's note</u>			
Reason for Referral: <u>Fistulotomy under general anesthesia as out pt.</u>			
History of Injury/Problem:		Date of Onset:	
<u>42 year old African-American male - chronic cyst which is draining intermittently. Pt was placed on suppressive antibiotics & successful.</u>			
Treatment to Date/Current Medications and Significant Medication History <u>Pt seen by Dr Hardesty on 12/9/98 and recommended fistulotomy</u>			
		Signature of Referring Physician _____ Date <u>12/10/98</u>	
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval	Medical Director Signature _____		Date <u>12/10/98</u>
Transmitted Date <u>12/16/98</u>	Transmitted By <u>Neil H. ...</u>		
Approval Date <u>12/11/98</u>	Approved By <u>Kaufman</u>		
Part B: To be completed by consulting Physician and returned with office to the institution			
Diagnosis and Recommendations: <u>Fistulotomy (5 clock) performed under gen anesth by ... w/assess wound packed with Sil-film No comp Pt. & K.R. in good cond 7-14 days 35-40 hr per pain (3) Vitamins & 1/2 cup daily 2-14 days 10-15 hr per pain (4) Sil-film daily beginning 1/15/99</u>			
Signature of Consulting Physician _____			Date <u>1/6/99</u>

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name: Smith, KimInmate Number: CT 2162DOB: 10-16-56

RM
10-99

No. 990000279

JAN 7 1999

CONSULTATION RECORD

Part A: To be completed by referring institution:		Type of Consult: <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Follow-up <input checked="" type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	
Referred to: <u>DR. HADESTY</u>		Referred by: (physician name) RONALD A LONG, M.D.	Appt. Date:
Specialty: <u>SURGERY</u>			Appt. Time:
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify) <u>MOTILIN, PEN, FENADANE, TEPANUS</u>			
Copies of lab and X-ray results attached? Yes No If yes, specify:			
Reason for Referral: <u>F/U S/P FISTULOTOMY, 06 JAN 99</u>			
History of Injury/Problem:		Date of Onset:	
Treatment to Date/Current Medications and Significant Medication History:			
RONALD A LONG, M.D. <u>07JAN99</u> Signature of Referring Physician Date			
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval		Medical Director Signature <u>Ronald A Long</u> Date <u>1/7/99</u>	
Transmitted Date: <u>1/7/99</u>		Transmitted By: <u>[Signature]</u>	
Approval Date: <u>1/8/99</u>		Approved By: <u>[Signature]</u>	
Part B: To be completed by consulting Physician and returned with officer to the institution			
Diagnosis and Recommendations: <u>F/u for above Generally doing well. Draining is pink more. Wound clean & healthy. F/u 1 month.</u>			
<u>[Signature]</u> <u>1/19/99</u> Signature of Consulting Physician Date			

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name: SMITH, KIMInmate Number: CT 2162DOB: 10-16-56

1202-99
1-30-99
1-30-99

CONSULTATION RECORD

No.

MAY 10 1999

Tele-derm

Part A: To be completed by referring institution:		Type of Consult: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input checked="" type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	
Referred to: Jagasothy Telenad		Referred by: (physician name)	Appt. Date:
Specialty: Dermatology		(REN)	Appt. Time:
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify) Motrin, PCN, Feldene, Tetanus			
Copies of Lab and X-ray results attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify: Recent chom down & Punches of 6-99			
Reason for Referral: Persistent Derm arms & legs			
History of Injury/Problem:		Date of Onset:	
Pt has a 5 year hx of persistent Derm on ARMS legs & torso.			
Treatment to Date/Current Medications and Significant Medication History: Valisone, Synalar, HC Cr, Erythromycin Derm persists despite Rx			
		RAY McMULLEN, PA-C WHS Signature of Referring Physician: [Signature] Date: 5-10-99	
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval	Medical Director Signature: [Signature]		Date: 5/19/99
Transmittal Date: 5/16/99		Transmitted By: [Signature]	
Approval Date:		Approved By:	
Part B: To be completed by consulting Physician and returned with office to the institution			
Diagnosis and Recommendations: Received Maryland VBC denial by Dr. Zaloga. Recommends: "continue conservative management." [Signature] 5/20/99 @ 1500 Ronald Long, M.D.			
		Signature of Consulting Physician: [Signature] Date:	

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name: Smith, Kim

Inmate Number: CT 2162

DOB: 10/18/56

Filed
SCS SMITH FIELD
Medical Records

ALTOONA HOSPITAL
DEPARTMENT OF NEUROLOGY
POLYSOMNOGRAPHY REPORT

CT2162
SMITH, KIM
42 Y/O
DOB: 10/18/62
PT# 58706490
Dr. Zlupko

TEST DONE: 03/16/99

POLYSOMNOGRAPHY REPORT: This is a case of obstructive sleep apnea diagnosed at a outside laboratory.

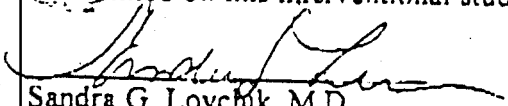
Using a standard technique for polysomnography, the following parameters were monitored: EEG, EOG, EMG, EKG, chest and abdominal respiratory excursion, nasal air flow and oxygen saturation. This study was done with interventional CPAP.

Patient achieved sleep 13 minutes after lights out, slept a total of 5 hours and 9 minutes during a 7 hour and 18 minute recording period. During this time, patient achieved stages I, II, III, IV and REM.

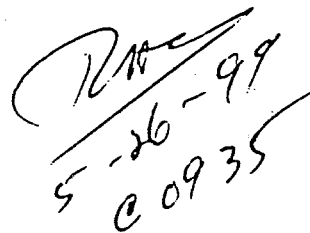
Patient had 23 respiratory events, 24 were apneas, 4 were hypopneas. 3 of the apneas occurred with an arousal and all of these were obstructive in character.

No snoring was audible. Interventional CPAP was used, with titration to 7 cm of water there was near complete resolution of the obstructive apnea events and at the pressure setting no significant desaturation was sustained. It might be noted that patient had some minimal oxygen desaturation to 88% during the titration.

IMPRESSION: This study demonstrates no significant obstructive sleep apnea with the use of CPAP at 7 cm of water. Of note, patient did have documented apneas during the recording period consistent with obstructive sleep apnea, but maximum severity of his illness could not be determined on this interventional study


Sandra G. Loychik, M.D.
Neurologist

SGL/rdp
D: 03/24/99
T: 03/24/99


RMC
5-26-99
C 0935

Received

Filed
RONALD A LONG, M.D.

MAY 26 1999

ALTOONA HOSPITAL
NEUROLOGY SLEEP ANALYSIS LAB
620 HOWARD AVENUE
ALTOONA PA 16601
(814) 946-2867

VER: ISS-0904-0C

NAM: KIM SMITH
ID : 58706490
PHY : DR. G. ZLUPKO
ROOM: ONE PAGE: 1
DATE: 16-MAR-99
AGE : 42 YR SEX: Male
HEIGHT: 66 in WEIGHT: 212 lbs
167 cm 96 kg

SHORT REPORT

Medical History

Sleep Stage Summary	Minutes	Hours
Time in bed	438	7:18
Total sleep time	309	5:09
Total sleep time (N-REM)	249	4:09
Total sleep time (REM)	48	0:48
Wake before sleep	13	0:13
Wake during sleep	118	1:58
Wake after sleep	---	0:00
Sleep period time	426	7:06
Latency Persistent Sleep	21	0:21
Movement time	12	0:12

Sleep Stage (Events)	ACTUAL
Arousals	20
Awakenings	---
REM Awakenings	---
Alpha Intrusions	---
Sleep efficiency	70

Stage	Wake	1	2	3	4	REM
% Stage	28	6.9	41	3.4	7.5	11
Minutes Stage	118	30	173	15	32	48
Latency Stage		13	18	35	300	237

Respiration Summary	ACTUAL	W/Arousal	W/Awake
Total events	28	3	---
Total Apneas	24	3	---
Total Hypopneas	4	---	---
Apnea index	4.7		
Hypopnea index	0.8		
Apnea+Hypopnea index	5.4		
% Sleep Apnea	2		
% Sleep Hypopnea	0		
Apnea index side	---		
Apnea index back	---		
Hypopnea index side	---		
Hypopnea index back	---		

ISS-0904-0C

Filed

RONALD A LONG, M.D.

MAR 21 1999
SON

RM
5-26-99
00925

No. 0000 4536

CONSULTATION RECORD

Part A: To be completed by referring institution:		Type of Consult: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	
Referred to:	Specialty:	Referred by: (physician name)	Appt. Date:
Dr. Young	Oral Surgeon	Dr. Kullar	4/2/00
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify)		Appt. Time:	
PCN, Malarin, Feldane			
Copies of lab and X-ray results attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, specify:	
Reason for Referral:		A #2 & #3	
History of Injury/Problem:		Date of Onset:	
Extraction #3: extremely decayed, very large cavity, extraction being done at night since few nights			
Treatment to Date/Current Medications and Significant Medication History:			
Dyrth. 500 mg & Tylenol ES.			
Amrit Kullar, D.M.D.			
Ronald Long, M.D.		Signature of Referring Physician	
Date: 4/2/00		Date: 4/2/00	
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval		Medical Director Signature:	
Transmittal Date: 4/2/00 1:35 PM		Transmitted By: Kullar	
Approval Date: 4/2/00		Approved By: Kullar	
Part B: To be completed by consulting Physician and returned with officer to the institution:			
Diagnosis and Recommendations: 5/3/2000 Oral Surg - pt new asymptomatic - assess periodontal sensitive to cold. pt has gingival recession & a 5-6mm pocket on palatal of #3. D+E poor oral hygiene. no xfts rec at this time.			
Ret Amrit Kullar, D.M.D. 3/00			
Signature of Consulting Physician: STEPHEN YOVINO D.M.D.			

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name: Smith, Kim
Inmate Number: CT2162
DOB: 10-18-56
Institution: SCT-Smithfield

File
MAY 04 2000
SCI-SMITHFIELD
Medical Records Dept.

No. 00007043

CONSULTATION RECORD

Part A: To be completed by referring institution:		Type of Consult: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input checked="" type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	
Referred to: STEPHEN YOVINO D.M.D.		Referred by: (physician name) Amrit Kullar, D.M.D.	Appt. Date: 7/2/00
Specialty: Oral Surgery		Appt. Time:	
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify) Pen, Mestin, Faldane			
Copies of lab and X-ray results attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify: #3			
Reason for Referral: decayed, tracking #3 is very extensive			
History of Injury/Problem: Inmate was seen by Dr Yovino for extraction #3. Dr Yovino recommended extraction. Attempted later, but could not extract.			
Treatment to Date/Current Medications and Significant Medication History: no meds prescribed			
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval		Medical Director Signature: Kaur Date: 6/27/00	
Transmittal Date: 6/27/00 2:00 PM		Transmitted By: R. Holmes	
Approval Date: 6/27/00		Approved By: Kaur	
Part B: To be completed by consulting Physician and returned with officer to the institution:			
Diagnosis and Recommendations: D/c. Inmate states #3 is asymptomatic Amrit Kullar, D.M.D.			
		Signature of Consulting Physician Amrit Kullar Date 6/26/00	

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name: **Smith, Kim**
Inmate Number: **CT-2162**
DOB: **10-18-56**
Institution: **SCIT-Smithfield**

No. 00007043

CONSULTATION RECORD

Part A: To be completed by referring institution:		Type of Consult: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	
Referred to: STEPHEN YOVINO D.M.D.		Referred by: (physician name) Amrit Kullar, D.M.D.	Appt. Date: 9/27/00
Specialty: Oral Surgeon		Appt. Time:	
Drug Sensitivity: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Specify) CN, Motrin, Feldene			
Copies of lab and X-ray results attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify:			
Reason for Referral: Extraction #3 is very extensively decayed			
History of Injury/Problem: Inmate was seen by Dr. Yovino for extraction #3. Recommended extraction. Attempted #3 latter. Inmate is in pain & wants extraction.		Date of Onset:	
Treatment to Date/Current Medications and Significant Medication History: No meds prescribed		Amrit Kullar, D.M.D.	
		Signature of Referring Physician: [Signature] Date: 9/7/00	
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Disapproval		Medical Director Signature: [Signature] Date: 9/7/00	
Transmittal Date: 9/7/00 1:45PM		Transmitted By: R. Holmes	
Approval Date: 9/8/00		Approved By: Butty	
Part B: To be completed by consulting Physician and returned with officer to the institution:			
Diagnosis and Recommendations: 9/27/2000 Oral Surg - ERRORED pt perioral pain ab #3 new asymptotic to retain if pain recurs. Amrit Kullar, D.M.D. 9/27/00 9/27/2000 Oral Surg - new local anesthetic surg ab #3 Pain relief procedure well; partial instructions Tylenol #3T @ 10 X 3 day; Tylenol #3 to follow STEPHEN YOVINO D.M.D. 1230h			
		Signature of Consulting Physician: [Signature] Date:	

Consultation Record
Commonwealth of Pennsylvania
Department of Corrections
DC-441

Inmate Name: Smith, Kim
Inmate Number: CT2162
DOB: 10-18-56
Institution: SCI - Smithfield

TRANSFER HEALTH INFORMATION

Sending Facility: SCI - Smithfield
 Receiving Facility: SCI - Westmoreland

Date: 06-21-99
 Date of Transfer: 06-18-99

	YES	NO	IF YES, SPECIFY
Allergies/Drug Sensitivities	✓		PCN, Fentanyl, Thorazine, Icterus
Chronic/Acute Health Problems	✓		Sleep apnea Chronic Rhinitis
Current Medications (Name, Dosage, Frequency, Duration, Route)	✓		Mecatein Cr. BID qd (exp 7-10) AvD sint BID qd (exp 7-10)
Current Treatment Plan	✓		PRN
Follow-up Care Needed	✓		PRN
Significant Medical History		✓	
Restrictions Dietary, Housing, Employment)		✓	
Pending Specialty Referrals (Appointment Date)		✓	
Physical Disabilities/ Limitations		✓	
Assistive Devices/Prosthetic	✓		Knee brace (exp. 9-10)
Mental Health Problem		✓	
History of Suicide Attempt		✓	Date of last attempt:
Last PPD	Date: <u>04-09-99</u> Result: <input checked="" type="checkbox"/> Negative <input type="checkbox"/> Positive mm: _____		
Last chest x-ray	Date: <u>12-30-99</u> Result: <u>(-)</u>		
History of TB prophylaxis	Medication: _____ Stop Date: _____		
History of treatment for TB disease	Medication: _____ Stop Date: _____		

[Signature]
 Nurse Signature, Title

06-21-99
 Date/Time

Transfer Health Information
 Commonwealth of Pennsylvania
 Department of Corrections
 DC-487

Inmate Name: Smith, Kim
 Inmate Number: CT 2162
 DOB: 10-15-56

Filed
 JUN 22 1999
 SCI-SMITHFIELD
 Medical Records Dept.

[Signature]

[Signature]

INTER-INSTITUTIONAL TRANSFER RECEPTION SCREENING

Transferring Institution: West Moreland Co ^{6wks} Receiving Institution: SCI Smi Date: 8-13-99

Current Acute Conditions/Problems: "Stomach Virus"

Chronic Conditions/Problems: arthritis @ knee, chronic urticaria,
past psych hx, sleep apnea,

Medications: (Name, Dosage, Frequency, Duration) none present

Allergies: Motrin, PCN, Feldene, Tetanus

Dietary Restrictions: none

Physical Disabilities/Limitations: back (limited ROM)

Visible Signs of Dental Problems: decaying gums

Bruises, Deformities, Evidence of Trauma: no physical abuse

Significant Medical History: same as above

History of Drug/Alcohol Abuse (Specify): see chart

General Appearance and Behavior: clean + composed

Complaints: 0

PHYSICAL AIDS

(check as appropriate)	YES	NO	DESCRIPTION		YES	NO	DESCRIPTION
Eyeglasses	X			Orthotics, Braces			
Contact Lens		X		Artificial Limbs			
Eye Prosthesis		X		Crutches/Cane			
Hearing Aid		X		Wheelchair			
Dentures	X	X	front + left cap	Other	X		lumbar + knee support

FEMALES ONLY

Gravida 0 Para 0

Date of Last Menstrual Period 08-10-99

Any chance of pregnancy now? Yes No

Any gynecological problems? no

Inter-Institutional Transfer Reception
Screening
Commonwealth of Pennsylvania
Department of Corrections
DC-479

Inmate Name: Smith Kim

Inmate Number: CT 2162

DOB: 0-18-56

Institution: SCI Smi

Filed
AUG 17 1999
SCI-SMITHFIELD
Medical Records Dept

Receiving Facility SCI Smithfield Date of Transfer: 8/13/99Allergies/Drug Sensitivities: Pen - Ecdene - Motrin - Tetan

Current Acute Health Problems: _____

Chronic Health Problems: Sleep Apnea, chronic chinitisCurrent Medications (Name, Dosage, Frequency, Duration, Route): Cocoa butter cream on other
shower

Other Treatment: _____

Follow-up Care Needed: _____

Other Significant Medical History: Chronic degenerative arthritis L5 S1 L4 spondyl

Restrictions (Dietary, Housing, Employment): _____

Pending Specialty Referrals (Appointment date if available): _____

Physical Disabilities / Limitations: _____

Assistive Devices / Prosthetics: Knee brace Dec 9/11/99Eyeglasses: ☒ Yes ☐ No**MENTAL HEALTH HISTORY:**Substance Abuse: ☐ Yes ☒ No Specify: _____☐ History of Suicide Attempt Date of last attempt: _____☐ History of Psychotropic Medication Specify: _____**TB INFORMATION**Date of last PPD 4/9/99 Result: ☒ Negative ☐ Positive mm: _____Date of last chest x-ray 12/30/99 Result: Neg☐ History of TB prophylaxis: Medication _____ Start Date _____ Stop Date _____☐ History of treatment for TB disease: Medication _____ Start Date _____ Stop Date _____Nurse Signature: [Signature] Title _____Date/Time: 8/12/99 1530Transfer Health Information
Commonwealth of Pennsylvania
Department of Corrections
DC-487Inmate Name: Smith, KimInmate Number: 1562-99DOB: 10/18/56

● INTER-INSTITUTIONAL TRANSFER RECEPTION SCREENING

Transferring Institution: SCI Smithfield Receiving Institution: SCI Coal Township Date: 1/18/01

Current Acute Conditions/Problems: _____

Chronic Conditions/Problems: Alzheimer's; Osteoporosis Rt Shoulder; Low back pain; Nipple LS - 83-87. Used lumbar support @ Smithfield - Last used 7 mos. ago; Arthritis @ knee; Diabetic - oral meds; Dry scaly fungus foot.

Medications: (Name, Dosage, Frequency, Duration) _____

Allergies: Feldene, Tetanus, Pen, Motrin

Dietary Restrictions: none self-monitors sugar intake.

Physical Disabilities/Limitations: none

Visible Signs of Dental Problems: missing tooth @ front June 2000..
C10 tooth extraction site causing some pain - Sept 00.

Bruises, Deformities, Evidence of Trauma: Blue scar Sq '75; Bilateral hernia repair - Abdominal Surg. '95

Significant Medical History: '92 - eye injury "schäblov-out"

History of Drug/Alcohol Abuse (Specify): @ smoked coke; Heroin, marijuana; Vodka use. IV use last 1

General Appearance and Behavior: _____

Complaints: post nasal drip & amon interfering sleep.

PHYSICAL AIDS

(check as appropriate)	YES	NO	DESCRIPTION		YES	NO	DESCRIPTION
Eyeglasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	not to him.	Orthotics, Braces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OK no shoes
Contact Lens	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Artificial Limbs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	7 aprax respiratory
Eye Prosthesis	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Crutches/Cane	<input type="checkbox"/>	<input checked="" type="checkbox"/>	? because support.
Hearing Aid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Wheelchair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Dentures	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Other	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

FEMALES ONLY

Gravida Para

Date of Last Menstrual Period _____

Any chance of pregnancy now? Yes No

Any gynecological problems? _____

WT. 221/65.

198.6 (2)

BP 150/90

188

R20

Inter-Institutional Transfer Reception
Screening
Commonwealth of Pennsylvania
Department of Corrections
DC-479

Inmate Name: Smith, Kim

Inmate Number: CT 2162

DOB: 10-10-56

Institution: SCI-Coral

DC-456		COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF CORRECTIONS	
X-RAY REPORT			
NAME	Smith Kim	NUMBER	CT 2162
X-RAY NUMBER		DATE OF X-RAY	9-24-99
		SMITHFIELD	TECHNICIAN MSK
<input type="checkbox"/> TREATMENT	<input type="checkbox"/> EXAMINATION	DETAILS	
<p>KUB</p> <p>Filec</p> <p>SEP 28 1999</p> <p>SCI-SMITHFIELD Medical Records Dept</p> <p>Hoffman</p> <p>PHYSICIAN</p>			
REPORT	<p>KUB: There is no calculi, obstruction, active disease or other significant abnormalities.</p> <p>IMPRESSION: No significant abnormal findings.</p> <p>HKS/kw; 9/25/99</p> <p>Henry K. Smith, D.O.</p> <p>9-28-99 01030 [Signature]</p> <p>Ronald Long, M.D.</p> <p>HOENTGENOLOGIST</p>		
DATE OF REPORT			
White - MEDICAL RECORD	Canary - X-RAY FILE	Pink - RADIOLOGIST FILE	

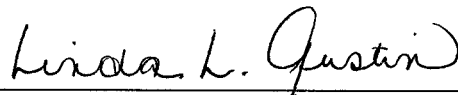
DC-456		COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF CORRECTIONS	
X-RAY REPORT			
NAME	Smith Kim	NUMBER	CT 2162
X-RAY NUMBER		DATE OF X-RAY	3-12-99
		SMITHFIELD	TECHNICIAN MSK
<input type="checkbox"/> TREATMENT	<input type="checkbox"/> EXAMINATION	DETAILS: Injured @ hand - Trauma and mechanism -	
<p>@ hand</p> <p>RAY McMULLEN, PA-C</p> <p>WHS</p> <p>[Signature]</p> <p>PHYSICIAN</p>			
REPORT	<p>LEFT HAND (3 VIEW): No definite evidence of acute bony injury is seen. There is faint radiolucency of the mid shaft of the 3rd proximal phalanx, in one view only most likely artifact. Mild soft tissue swelling is noted overlying the metacarpals.</p> <p>IMPRESSION: No definite acute bony injury is seen.</p> <p>HKS/kw; 3/14/99</p> <p>Henry K. Smith, D.O.</p> <p>3-17-99 [Signature]</p> <p>RAY McMULLEN, PA-C</p> <p>Filec</p> <p>MAR 17 1999</p> <p>SCI-SMITHFIELD</p>		
DATE OF REPORT			

CERTIFICATE OF SERVICE

I, Linda L. Gustin, an employee with the law firm of Lavery, Faherty, Young & Patterson, P.C., do hereby certify that on this 21st day of January, 2003, I served a true and correct copy of the foregoing **Appendix of Exhibits in Support of Wexford Defendants' Motion for Summary Judgment**, via U.S. First Class mail, postage prepaid, addressed as follows:

Kim Smith
CT-2162
SCI-Coal Township
1 Kelley Drive
Coal Township, PA 17866-1020

John Talaber, Esquire
Assistant Counsel
Pennsylvania Department of Corrections
Office of Chief Counsel
55 Utley Drive
Camp Hill, PA 17011



Linda L. Gustin